

Tottenham Urban District Council.

Report

ON THE

HEALTH OF



TOTTENHAM



FOR THE

YEAR 1925.

*Crusha & Son, Ltd.,
Tottenham, Enfield and Wood Green.*

SUMMARY OF STATISTICS FOR 1925.

Area	..	..	..	..	3,014 acres.
Population	..	..	..		156,700
Births	..	..	..	..	2,756
Birth-rate	..	..	..		17·6 per 1,000 of population.
Deaths	..	..	..	..	1,596
Death-rate	..	..	..		10·1 per 1,000 of population.
Deaths under 1 year of age	..				150
Infant Death-rate	..	..			54·4 per 1,000 births.
Phthisis Death-rate	..	..			0·71 per 1,000 of population.
Rateable Value	..	..			£642,147
Amount Produced by 1d. Rate					£2,550

Tottenham Urban District Council.

HEALTH COMMITTEE:

Chairman:

MR. COUNCILLOR A. REED, A.F.I.

Members:

(*Ex-Officio*): MR. COUNCILLOR T. INGLIS, J.P.

(*Chairman of the Council.*)

(*Ex-Officio*): MR. COUNCILLOR W. R. JACKSON

(*Vice-Chairman of the Council.*)

Mrs. COUNCILLOR F. C. BRIGHTEN.

Mr. „ J. BRISTOW.

„ „ E. S. BROWN.

MISS COUNCILLOR R. F. COX.

Mr. „ F. EASTON.

„ „ T. ELDERFIELD.

„ „ H. FARTHING.

Mrs. „ E. L. FINCH.

Mr. „ E. FROST.

MAJOR P. B. MALONE, M.P., J.P.

Mr. COUNCILLOR W. E. MONTAGUE.

Representatives on the Middlesex Districts Joint Smallpox Hospital Board:

Mr. COUNCILLOR T. ELDERFIELD.

„ „ T. INGLIS, J.P.

MAJOR P. B. MALONE, M.P., J.P.

Council's Representative on the Metropolitan Water Board under the Metropolis Water Act, 1902:

MAJOR P. B. MALONE, M.P., J.P.

Heads of Departments:

Clerk and Solicitor:—REGINALD C. GRAVES, Esq., LL.D.
 Engineer and Surveyor:—Captain H. F. WILKINSON, R.E., A.M.Inst.C.E.
 Treasurer:—E. Young, Esq., A.S.A.A.
 Clerk, Education Committee:—W. MALLINSON, Esq.
 Director of Education:—A. J. LINFORD, Esq., B.Sc.
 Superintendent, Fire Brigade:—I. EASTON, Esq.
 Librarian:—W. J. BENNETT, Esq., F.L.A.
 Superintendent of Baths:—T. J. LEWIS, Esq.

STAFF.**1. Health Department.***Medical Officer of Health—*

§ DAVID C. KIRKHOPE, M.D., Ch.M., D.P.H.,
 of Gray's Inn and Middle Temple, Barrister-at-Law.

Male Sanitary Inspectors—

§*REDSTON, W. (Chief Inspector)	Harringay Ward.
(117, Broadwater Road)	
§†*PORTMAN, W. C... ..	High Cross Ward.
(13, West Road.)	
§†*WEST, W. P.	West Green Ward.
(33, Drayton Road.)	
§‡*MILLER, H. W.	Middle Ward.
(119, Sperling Road.)	
§†*SHILLITO, J. A.	Lower Ward.
(9, Cedar Road.)	
§†*SMITH, J. B. (Cert., S.I. Ex. Brd.)	St. Ann's Ward.
(86, Chester Road.)	

Female Sanitary Inspector—

§*LAMB, Miss M.

*The Officials so marked hold the Certificate of the Royal Sanitary Institute.

†The Officials so marked hold a Meat Inspector's Certificate.

‡This Inspector holds the Diploma of the Incorporated Institute of Hygiene.

§Contribution to salary from Exchequer Funds.

Inspector under the Shops Acts—

STACY, H. J.

Nurses for Infectious Diseases—

*†‡R. BENTLEY-CORNER.

*†‡§R. HYATT.

*†‡S. SWAFFIELD.

*†‡M. TIMLIN.

*†§¶B. WHITAKER.

* General Training Certificate. † C.M.B. ‡ Fever Training Certificate.

§ Health Visitor's Diploma. ¶ Massage, Electricity and Nervous Diseases
Certificates.*Clerical Staff—*

GARVEY, R., Chief Clerk (Cert., Roy. San. Inst.)

BAKER, S., Clerk.

BENNETT, P. W. T., Clerk (Cert., Roy. San. Inst.).

POTTER, W., Clerk.

LAWRENCE, H. L., Junior Clerk.

Mortuary Attendant—

H. CORDER, 24, Loobert Road, Clyde Circus.

Disinfectors—

A. SMITH (Houses).

J. MITCHELL (Clothing).

J. COLLIN ,,

Drain Testers, Etc.

H. BYSOUTH.

J. WILSON.

F. DOWSE.

C. VESSEY.

2. School Medical Department.

School Medical Officer—

DAVID C. KIRKHOPE, M.D., Ch.M., D.P.H.,
of Gray's Inn and Middle Temple, Barrister-at-Law.

Senior Assistant Medical Officer—

ALICE STALKER, M.B., Ch.B., D.P.H.

Assistant Medical Officers—

GRACE T. ANDERSON, M.B., Ch.B.

R. HASTINGS SMYTHE, L.R.C.P. and S.I.

Ophthalmic Surgeon—

T. W. LETCHWORTH, F.R.C.S. (Part-time).

Aurist—

A. R. FRIEL, M.A., M.D., F.R.C.S.I. (Part-time).

Dental Surgeons—

V. SAINTY, L.D.S., R.C.S. (Eng.)

L. S. PILBEAM, L.D.S., R.C.S. (Eng.)

School Nurses—

*†E. JOHNS. *M. PICKBURN. *†W. BARNES. *‡C. VINE.

*†L. ROGERS. *†E. LINDSAY. ‡E. BARRATT. *†H. McMATH.

* General Training Certificate. † C.M.B. ‡ Fever Training Certificate.

Clérical Staff—

V. GODDARD (Chief Clerk).

E. ING. T. E. COHEN (A.I.S.A.). J. E. MILLER.

3. Maternity and Child Welfare Committee.

Medical Officer—

DAVID C. KIRKHOPE, M.D., Ch.M., D.P.H.,
of Gray's Inn and Middle Temple, Barrister-at-Law.

Part-Time Medical Officer, Infant Welfare Clinics—

CHARLOTTE ALICE KING, M.D., B.S., D.P.H.

Part-Time Medical Officer, Ante and Post Natal Clinics—

DOROTHY C. LOGAN, M.D., B.S.

Superintendent Health Visitor—

§†‡Mrs. J. KENT-PARSONS.

Health Visitors.

†¶aB. WALLACE.
*†§aM. BLANCHARD.
*†G. MASON.
*†°N. HEADLEY.

*†°aF. FLETCHER.
*†a bG. M. HOCKIN.
*†a bcE. M. DUNN.
*†¶M. F. REYNOLDS.

§ Health Visitor's Diploma.
‡ San. Insp. Exam. Bd. Cert.
¶ R.S.I. San. Insp. Cert.
a R.S.I. Health Vis. Cert.

* General Training Cert.
† C.M.B.
° Fever Training Cert.
b Moorfields Eye Hosp. Cert.

c Alton T.B. Hosp. Cert.

Creche—

Matron—F. E. TREWINNARD (Creche Trained).

Nurses—K. T. BROWN (General Training Cert.), J. BYATT (San. Insp. Exam. Bd. Cert., C.M.B., Health Visitor's Diploma), M. HOWE.

Clerical Staff—

E. HORTON. M. E. COLEMAN. E. E. FISHER. G. A. ELLIOTT.

**Addresses of other Public Officers, more or less connected
with Public Health Work.**

Registrars of Births and Deaths—

East Tottenham: Mr. H. J. ROYNON, 664, High Road.

West Tottenham: Mr. E. S. CHAPMAN, 239, West Green Road.

Relieving Officers—

East Tottenham: Mr. LISTER, 43, Snells Park, Edmonton, and
Mr. J. SWEET, Church Hall, Dorset Road, N.15.

West Tottenham: Mr. J. GRAVILLE and Mr. A. J. MISTER,
Church Hall, Dorset Road, N.15.

Public Vaccinators—

Dr. T. McLAREN, 38, Bruce Grove.

Dr. A. C. HILL, 99, Philip Lane.

Dr. F. SHARPE, 326, Philip Lane.

Vaccination Officer—

Mr. H. J. ROYNON, 664, High Road.

Coroner's Officer—

Police-Sergt. V. BONN, Police Station, High Road.

INTRODUCTION

TO THE

ANNUAL REPORT of the MEDICAL OFFICER OF HEALTH.

Health Department,
Town Hall,
Tottenham.

April, 1926.

To the Chairman and other Members of
the Tottenham Urban District Council.

Ladies and Gentlemen,

I have the pleasure to submit this, my thirteenth Report upon the Health and Sanitary Conditions of the District. It is for the year 1925, and is of a comprehensive nature such as is required by the Ministry of Health at five-yearly intervals.

Generally, the health conditions of the people—in so far as they can be ascertained from the Death-Rate level—may be regarded as favourable.

It is not to be assumed from the low Death-Rate that the amenities of the District are all that could be desired; the reverse is the fact. There has been a swinging back of the pendulum.

Until about 1907, the functions of the Health Authority consisted mainly in supervising and regulating the Sanitary and other environmental conditions of the people, at home and at work.

Since the establishment of the School Medical and, subsequently, of the Maternity and Child Welfare Services the care of the Health Authority has been largely—indeed, principally—for the individual.

It is true the Sanitary Services have not been neglected, but their operations have been seriously impeded by economic conditions. Sufficient houses have not been built to replace those that have fallen into decay, to house the increasing population and to afford a surplus of houses that will allow of some flotation of population. The result is that many families are living two or more to a house—and, occasionally, a family in a single room—notwithstanding the fact that they are both able and willing to pay rent for more commodious dwellings.

Environmental conditions are they which call most clamantly for reform, whilst the care of the individual is maintained, intensified and consolidated.

At the moment of writing, there are upon the register of those who seek houses on the Council's Estate no fewer than 2,800 families.

Very many of these families are living under most distressing conditions, and it is manifest that Tottenham has not the land available upon which to build houses for them all—unless, indeed, they are of the large tenement type, and I do not advise that system of housing.

What appears to be wanted is cheap, clean and rapid transit from the Metropolis to an ever-widening circumference according to the needs of London's immense industrial and commercial population.

Adequate means of transit are not available for Tottenham to and from the Metropolis. Trams and buses, morning and night, have been crammed to suffocation until police intervention caused the numbers carried to be limited, with the result of diminishing travelling accommodation.

The Great Eastern Railway's passenger traffic is enormous, and the number said to be crowded at the "rush" hours into a compartment intended to seat 12 is incredible. The carriages themselves are not intended to appeal to the aesthetic sense of the traveller—and they do not. Only necessity would oblige the third-class traveller to seek this means of reaching his destination.

At the busy morning and evening hours, the Underground Railways from Finsbury Park are likewise congested, and the multitude of people awaiting tram and bus service from Finsbury Park to the Northern Suburbs in the evening is an invitation to serious accident.

Your Council have been active in presenting the urgency of the situation to the proper Authorities, and, while on every hand its seriousness is admitted, nothing is done or suggested on a scale commensurate with the need.

The facilities for travelling to and from the City by omnibuses in ever-increasing number are at the cost of greater peril to foot passengers; and the heavy vehicular road traffic is no doubt responsible for the repairs that the thoroughfares are constantly undergoing.

The solution of the housing difficulty appears to lie in the extension and enlargement of the Underground system.

Pollution of the River Lee below Tottenham Lock has been the subject of your Council's deliberations on various occasions. The several Authorities concerned with the River and its tributaries have the matter under investigation. It is hoped that as the result of their enquiries and action arising thereout, that portion of the Lee below the Lock will be cleansed and further pollution prevented.

The disposal of refuse is a subject that still requires careful consideration. For some years, neighbouring Authorities were permitted by the owner of vacant land adjoining Green Lanes to deposit refuse on the site. The result is that an unsightly heap obstructs the view from the back premises of many of the houses in Hermitage and adjacent roads. Legislature does not provide against the private owner of land using it in such a manner as seriously to impair the amenities of a District in the manner described. It is submitted that it ought to be made possible for Local Authorities to prohibit, subject to proper safeguards, the use of land to the detriment of the community.

The method by which refuse should be disposed of has engaged your attention, and the problem cannot yet be said to be definitely and finally solved. Whilst the Destructor was undergoing renovation, barging out of the District was resorted to. Prior to that, when the Destructor was incapable of dealing with the amount daily being collected, quantities were deposited on the Marshes. The increased housing provision, and doubtless other factors, have rendered it impracticable to deal with the whole of the house and shop refuse by incineration. The Gravel Pit on the Devonshire Hill site has been taken advantage of for the deposit of surplus shop refuse, road sweepings and gullyslop. There can be no doubt of the propriety of having this Pit filled in. It constitutes a huge receptacle for stagnant water where, but for the precaution taken of spraying periodically with kerosene, opportunity is given for the maturation of mosquito larvae. But it is respectfully submitted that decaying and putrescible vegetable refuse should constitute no part of the filling material. Apart from the offence that will naturally arise from the odours of putrefaction, flies will find there a favourable breeding ground. The menace of the fly pest is one that must always be vigorously countered in view of the possibility of its effect on Infant Mortality by Summer Diarrhoea, which, in its epidemic incidence, is more easily avoided than remedied.

In Tottenham Park—an estate belonging to the Burial Board—there is a Lake which, for all practical purposes, is stagnant. Ineffectual representation has been made to the Board, asking them to have the Lake

filled in. It is desirable that that should be done, or that the Lake be drained in order that it may not constitute a breeding place for mosquitoes.

Your Council have had under consideration the making of Bye-Laws requiring the slaughter of food animals by humane methods. With this end in view, your Health Committee received deputations of butchers and other interested parties, and heard arguments for and against the proposition. Bye-Laws were made in 1925, and received the approval of the Ministry of Health in 1926. Copies of these Bye-Laws requiring, *inter alia*, the slaughter of large animals intended for the food of man to be effected by mechanically-operated instruments, were sent to the butchers in the District.

The Public Health (Meat) Regulations, 1924, came into operation on 1st April, 1925. These require that meat exposed for sale shall be protected effectively from dust, filth and flies. The proviso to these regulations, issued by the Ministry of Health, to the effect that they shall not be interpreted to imply an obligation on the part of meat vendors to protect meat by glass windows, renders their operation exceedingly difficult if not altogether nugatory. The provision of a sun-blind and side curtains to a stall established in front of a shop or even in the roadway, cannot conceivably be regarded as sufficient protection to meat displayed thereon from dust, flies and filth.

The question of the establishment of a Public Abattoir is still under consideration.

Deputations from the confectioners of the District who regarded the imposition of the provisions of the Shops Acts as prejudicial to their interests, waited upon your Health Committee and explained their position. Having regard to the fact that the Council are designated by the Acts as the Authority who are to administer them, they (the Council) felt that they had no option in the matter and must require confectioners to abide by the statutory provisions.

Health Week was observed in 1925, as in the previous four years, by the distribution to school children of leaflets containing skeletons of five Essays. As the result of the Essay Competition arising thereout, 12,713 essays were submitted. The prizes—including gifts of valuable books and trinkets from two of your Councillors—were distributed at a meeting in the Municipal Hall, attended by a large section of the public.

The Local Government and Other Officers' Superannuation Act, 1922, came into operation on 1st April, 1925. All entrants into the

permanent employment of your Council are required to pass a medical examination by one of your Medical Staff as an essential condition of admission. 66 candidates were thus examined, and satisfied the requirements of the examiners.

Reference to the Birth and Death-Rate tables will show that while there has been a declension in the Birth-Rate (17.6 per 1,000 of the population in 1925, as against 18.2 per 1,000 in 1924), the Death-Rate has increased from 9.9 per 1,000 in 1924 to 10.1 per 1,000 in 1925. This increased Death-Rate is not reflected in the Infant Mortality Rate, which has declined from 61.6 per 1,000 children born in 1924 to 54 in 1925. Without engaging in the controversy as to whether a decreased Birth-Rate is desirable or otherwise, the increased Death-Rate and lowered Birth-Rate indicates an ageing population. Carried over a considerable number of years, the inevitable result would be that a sufficient number of children will not be born to replace those dying at the other end of man's span of life, and a process of depopulation would set in; that, from the Public Health point of view, would be unfortunate. It is to be noted that the Birth-Rate has been steadily falling since 1920.

The generous support that the Council as a whole, and its members individually, have consistently given to the work of the Department—control of which they entrusted to me—is much appreciated by all the members of my staff, who desire me to express their sincere thanks.

I am, Ladies and Gentlemen,

Your obedient Servant,

David C. Kirk Rhope.

NATURAL AND SOCIAL CONDITIONS OF THE AREA.

The area extends to 3,014 acres. Public open spaces occupy $245\frac{1}{2}$ acres, and 54 acres have recently been purchased for an extension of the Downhills Recreation Ground. Approximately 10 acres, 2 roods are under water. The areas under water include Reservoirs, the Lee and its tributaries—Moselle Brook, Stonebridge Brook and Pymmes Brook.

About 200 acres are still available for building and other purposes. It has been pointed out in the foreword of the Report that nearly 3,000 families are awaiting housing accommodation in Tottenham. On the reckoning that there should not be more than 12 houses to the acre, it will be seen that to house adequately the inhabitants of the District, acreage is not available in the District, even supposing all the disposable land were utilised for housing purposes.

Population.

The 1921 census population was returned by the Registrar-General at 146,711.

The census figure of 1921 distributed equally over the whole District gives the average number of persons per inhabited house at 6.08, and per tenement 3.04. By this system of calculation, the Treasurer has deduced that the population at midsummer, 1925, was 156,700. The Registrar-General estimates by a different process that the midsummer population of Tottenham was 153,600. As in previous years, the vital statistical tables for this Report are based on the assumption that the Treasurer's figures are approximately correct.

Return of Houses, Population, etc., at Mid-Summer, 1925, as supplied to us by the Treasurer's Department.

Ward.	Acreage.	Total Number of *Houses.	Other Buildings and †Assessments.	Total Number of Assessments.	Estimated Population.	Density of Population per Acre.	Rateable Value.
High Cross	463	5,081	218	5,299	27,000	58.3	£ 125,125
Middle	617	5,778	288	6,066	29,240	47.4	110,989
Lower	950	5,941	249	6,190	30,450	32.1	109,153
West Green	470	3,895	152	4,047	19,550	41.6	75,763
Harringay	263	4,264	270	4,534	22,550	85.7	98,921
St. Ann's	251	4,830	229	5,059	27,910	111.2	80,005
Throughout the Parish }	—	—	15‡	15‡	—		42,191
Totals	3,014	29,789	1,421	31,210	156,700	51.9	£642,147

*Houses, Houses and Shops, and Tenements.

†Lock-up Shops, Stables, Workshops, Garages, Schools, Factories, Glasshouses Land, etc.

‡Railways, Tramways, Reservoirs, Gas, Water and Electric Mains.

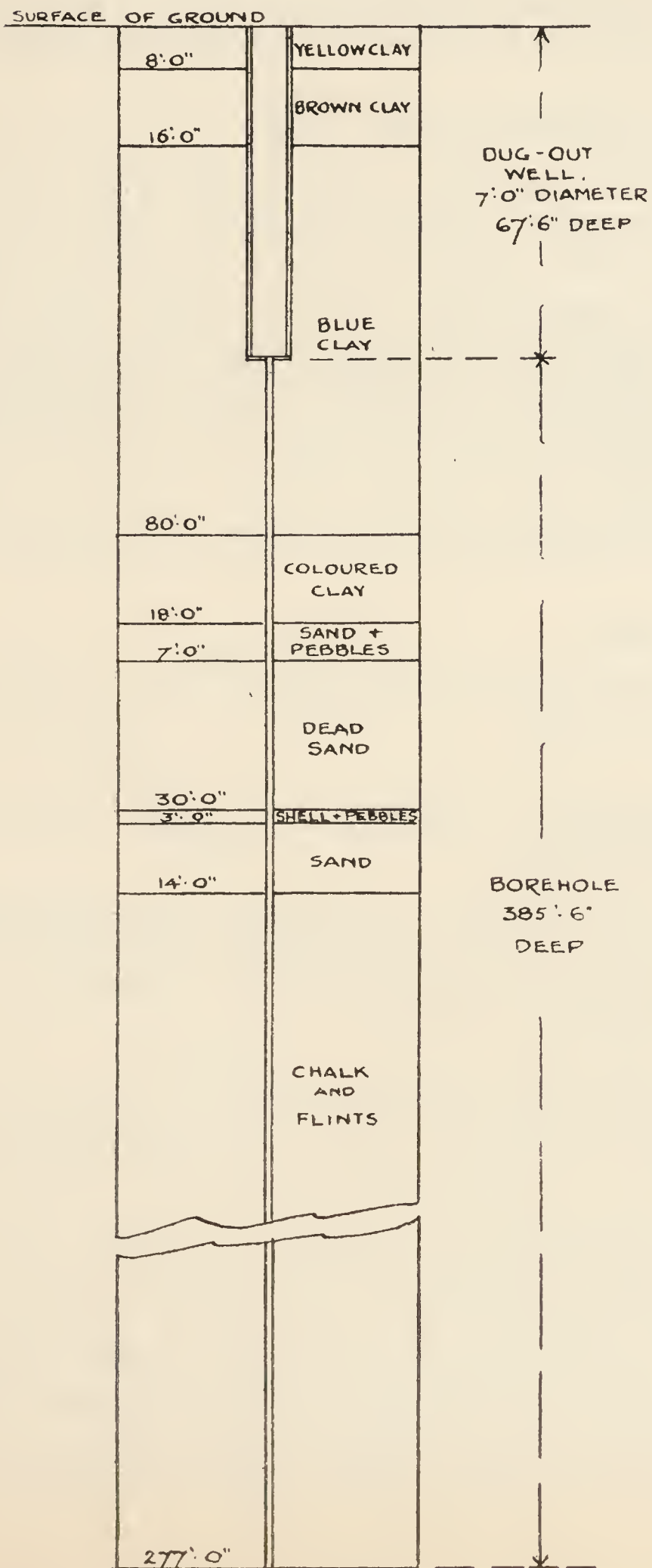
Physical Features and General Character of the Area.

Tottenham is due north of London—the ‘Queen’s Head’ being 5 miles north of Portland Place, and the milestone on the open space at the junction of West Green Road and Broadway, Tottenham, marking the 4-mile limit from London (Shoreditch Church).

Tottenham is bounded on the south by the Metropolitan Boroughs of Hackney and Stoke Newington, on the west by the Borough of Hornsey and the Wood Green Urban District, on the north by Edmonton, and on the east by Walthamstow.

The accompanying diagram, showing the various strata to a depth of over 400 feet, gives the composition of the soil upon which Tottenham stands. It represents particularly the site of the present Town Hall. The bore-hole indicated is that from which water is extracted for the supply of the Central Baths.

TOTTENHAM MUNICIPAL BUILDINGS.
SECTION OF WELL.



The highest point in the District is at the Downhills Water Tower, where the ground level reaches 100.9 feet above sea level. About the same level is reached at Devonshire Hill. The lowest level, viz., 25 feet above sea level, is reached on the Marshes, in the vicinity of the River Lee. This proximity of the Town to the River and its tributaries renders the lower-lying part of the District liable to mists and fogs.

Number of Inhabited Houses, 1921.

The Registrar-General's returns showed that there were 25,311 structurally separate dwellings occupied. The Treasurer's returns showed that houses, houses and shops and tenements numbered 28,685—28,581 being then occupied, and 104 empty. The difference in the numbers given by the Registrar-General and Treasurer is due to the Treasurer calculating the number of separate assessments, there being many structurally separate dwellings in the District with two or more assessments each.

At the census there were in Tottenham 35,386 private families.

Rateable Value.

The Rateable Value of the District in 1925 was £642,147, and a 1d. Rate produced £2,550.

Social Conditions, including the Chief Occupations of the Inhabitants.

The close proximity of Tottenham to the Metropolis makes the former one of the dormitories of the City. At the census, it was calculated that 26.5 per cent. of the population, viz., 38,903 persons, were occupied outside the District.

The needs of the travelling public are served by the London and North Eastern Railway Co. and the London, Midland and Scottish Railway Co.

There are altogether 10 stations in Tottenham. South Tottenham, St. Ann's Road and Haringay Park connect this District with Southend, Tilbury and Woolwich on the one side, and St. Pancras and Moorgate on the other. On the London and North Eastern Railway system, there are 2 stations on the Cambridge Branch at Tottenham Hale and Northumberland Park; on the Enfield Branch there are 4 stations, viz., Stamford Hill, Seven Sisters, Bruce Grove and White Hart Lane; and

on the Palace Gates Branch there is 1 station, in West Green Road. The L. & N.E. system communicates centrally with Liverpool Street Terminus.

Trams and buses also connect the City with the District. The central termini of the trams are Liverpool Street, Holborn, Smithfield Market, Tottenham Court Road, Aldersgate and Aldgate.

The buses convey passengers across London to Camberwell Green, Victoria, Southfields, Sidcup and Shooters Hill.

The population is mainly of the working, artisan and clerical classes. Allusion has been made in the foreword to the numbers travelling to and from the City.

The chief industries in the District are the following:—Cabinet-making, pencil-making, piano-making, dress, blouse and mantle-making, building, the manufacture of sweets, stationery, indiarubber, emery cloth, brushes, cyclostyle materials, lamps, boots and shoes, toys, joinery, electrical fittings, silk braid weaving, brewing and mineral water manufacturing, bedstead and scientific instrument-making and motor manufacturing.

BIRTHS.

Births Registered:—Males	..	..	..	..	..	1,388
Females	..	..	..	..	..	1,368
						<hr/>
Total	..	..	..	..	..	2,756
						<hr/>
Including Illegitimate Births:—Male	..	..	..	..	..	31
Female	..	..	..	..	..	30
						<hr/>
Total	..	..	..	..	..	61
						<hr/>
Births occurring in the district	..	..	..	..	..	2,275
Births of Tottenham residents occurring outside the district	..	..	..	..	..	481
						<hr/>
Total	..	..	..	..	..	2,756
						<hr/>

Birth Rate, 17.6 per 1,000.

Births notified under the Notification of Births Acts:—

In district by Doctors	..	..	..	..	..	603
,, ,, Midwives	..	..	..	..	..	1,355
,, ,, Parents and other persons				..	..	265
Notified from outside Institutions			..	..	..	452
						<hr/> 2,675
Advised by Registrar	..	..	..	..	..	48
						<hr/>
Total	..	..	..	..	..	2,723
Less 85 Still Births	..	..	..	..	..	85
						<hr/> 2,638
						<hr/>

DEATHS.

The total number of deaths registered in Tottenham was	..					1,105
						<hr/>
Of these, the number of non-residents was	..	..	..			213
						<hr/>
Deaths of residents registered in the district	..	..	..			892
Deaths of residents registered outside the district	..	..				704
						<hr/> 1,596
						<hr/>
Deaths of residents under 1 year occurring in district	..					100
Deaths of residents under 1 year occurring outside district	..					50
						<hr/>
Total deaths of Tottenham infants	..	..	..			150
						<hr/>

These deaths are distributed in age groups as follows:—

Deaths under 1 year	..	..	..	..	..	150
Deaths from 1 to 5 years	..	..	..	..	..	75
Deaths from 5 to 15 years	..	..	..	..	..	50
Deaths from 15 to 25 years	..	..	..	..	..	64
Deaths from 25 to 65 years	..	..	..	..	..	584
Deaths 65 and upwards	..	..	..	..	..	673
						<hr/> 1,596
						<hr/>

The excess of births over deaths is 1,160.

The death rate equalled 10·1 per 1,000 of the population.

Table showing the Population, Birth and Death Rates, in Wards, during 1925.

Ward.	No. of Births.	No. of Deaths.	Population.	General Birth-rate.	General Death-rate.	No. of Deaths Under 1 Year.	Infant Mortality per 1,000 of Population.	Infant Mortality per 1,000 Births.
Harringay ..	366	220	22,550	16.2	9.7	18	0.8	49.2
West Green ..	280	193	19,550	14.3	9.9	14	0.7	50.0
St. Ann's ..	559	309	27,910	20.0	11.1	38	1.4	67.9
High Cross ..	467	290	27,000	17.3	10.7	23	0.8	49.3
Middle ..	492	298	29,240	16.8	10.2	27	0.9	54.9
Lower ..	592	286	30,450	19.4	9.4	30	0.9	50.7
Total ..	2,756	1,596	156,700	17.6	10.1	150	0.9	54.

M. of H. TABLE I.

Table showing the Population, Birth Rate, and Death Rate from all causes, in Tottenham during the last six years.

YEAR.	Population estimated to Middle of each Year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.			Deaths of Non-residents registered in the District.	Deaths of Residents not registered in the District.	NETT DEATHS BELONGING TO THE DISTRICT.			
		Un-corrected Number.	Nett.		Number.	Rate.	Under 1 Year of Age.			At all Ages.			
			Number.	Rate.			Number.			Rate per 1,000 Nett Births.	Number.	Rate.	
1	2	3	4	5	6	7	8	9	10	11	12	13	
1920	156,020	3,854	4,064	26·04	1,302	8·3	275	438	248	61·0	1,465	9·3	
1921	149,200	3,402	3,402	22·8	1,274	8·5	258	537	231	67·9	1,553	10·4	
1922	152,000	2,777	3,167	20·8	1,496	8·8	352	559	203	64·0	1,703	11·2	
1923	154,300	2,641	3,093	20·0	1,021	6·6	194	581	180	58·1	1,408	9·1	
1924	156,000	2,397	2,853	18·2	1,183	7·5	250	626	176	61·6	1,559	9·9	
1925	156,700	2,275	2,756	17·6	1,105	7·0	213	704	150	54·4	1,596	10·1	

NOTES TO (M. of H.) TABLE I.

The nett rate is the true one, as it represents the deaths of all Tottenham people, whether they took place within or without the Parish, and is the rate adopted by the Registrar-General, non-residents being always allocated to the district to which they belong.

By the term "Non-Residents," is meant persons brought into the district on account of illness, and dying there; and by the term "Residents," is meant persons who have been taken out of the district on account of illness, and have died elsewhere.

1.—Institutions within the district receiving sick and infirm persons from outside the district:—

Prince of Wales's General Hospital, The Green.

Metropolitan Asylums Board (North Eastern) Hospital, St. Ann's Road.

Jewish Home and Hospital for Incurables, High Road.

Nursing Home, Bruce Grove.

2.—Institutions outside the District receiving sick and infirm persons from the District:—

North Middlesex Hospital, Edmonton.

Enfield and Edmonton Joint Hospital, Enfield.

Clare Hall Sanatorium, South Mimms.

Middlesex County Hospital, Isleworth.

Middlesex County Sanatorium, Harefield.

Metropolitan Asylums Board Hospitals (other than the North Eastern).

3.—Other Institutions, the deaths in which have been distributed among the several localities in the District:—

Hospitals, etc.:—

Guy's, Southwark.

Middlesex, St. Marylebone.

St. Bartholomew's, West Smithfield.

Queen's Hospital for Children, Hackney Road.

University College, Gower Street.

London Temperance, Hampstead Road.

Hospital for Sick Children, Great Ormond Street.

City of London Maternity, City Road.

Charing Cross, Strand.

Women and Children, Paddington.

The Mothers', Clapton.
 Royal Waterloo, Lambeth.
 St. Mark's, City Road.
 London, Whitechapel.
 St. Luke's, Paddington.
 Westminster, Broad Sanctuary.
 Royal Chest, City Road.
 Epilepsy and Paralysis, St. Marylebone.
 St. Peter's, Stepney.
 St. Columbus, Hampstead.
 Kensington General, Kensington.
 Lambeth, Brook Street.
 Bethlem Royal, Southwark.
 Cancer, Chelsea.
 Springfield Hospital, Wandsworth.
 Royal Free, Grays Inn Road.
 Central London, Throat and Ear.
 Metropolitan, Kingsland Road.
 Hampstead General, Hampstead.
 Royal Northern, Holloway.
 Enfield House, Enfield.
 Paddington Infirmary, Harrow Road.
 City of Westminster Infirmary, Fulham Road.
 Brook House, Upper Clapton.
 Nursing Home, Amhurst Park.
 Ladywell, Lewisham.
 Park Prewett Hospital, Sherborne.
 Westcliff Nursing Home, Westcliff-on-Sea.
 Hackney Institution, Brentwood.
 St. Andrew's, Thorpe.
 Leavesden, Watford.
 Emergency, Ilford.
 Prince Albert Convalescent Home, Worthing.
 Infirmary, Harrogate.
 All Saints', Eastbourne.
 Royal Alexandra, Brighton.
 Napsbury, St. Albans.
 St. Anthony's, Cheam.

M. of H. Table II.—*Table of cases of Infectious Disease coming to the knowledge of the Medical Officer of Health during the year 1925 in the Tottenham Urban District, classified according to Diseases, Ages and Localities.*

NOTIFIABLE DISEASE.	NUMBER OF CASES NOTIFIED.												TOTAL CASES NOTIFIED IN EACH LOCALITY						TOTAL CASES REMOVED TO HOSPITAL.	
	At all Ages	At Ages—Years											1 Harringay	2 West Green	3 St. Ann's	4 High Cross	5 Middle	6 Lower		
		Under 1	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65								65 and over
Encephalitis Lethargica	17	—	—	1	—	—	—	1	3	2	4	6	—	—	4	1	10	—	2	1
Diphtheria (including Membranous Croup) ..	252	2	14	11	13	27	116	33	14	19	3	—	—	26	21	43	53	43	66	227
Erysipelas ..	44	2	—	—	1	—	1	4	2	8	6	15	5	5	6	15	8	6	4	12
Scarlet Fever ..	427	—	16	12	27	42	196	82	18	28	6	—	—	57	83	90	40	60	97	68
Enteric Fever ..	2	—	—	—	—	—	1	—	—	1	—	—	—	—	—	—	1	—	1	2
Pneumonia ..	149	16	9	6	8	7	15	4	8	21	19	26	10	26	22	38	19	14	30	—
Puerperal Fever ..	6	—	—	—	—	—	—	—	—	5	1	—	—	—	—	2	2	2	—	—
Cerebro-spinal Meningitis	2	—	1	—	—	—	1	—	—	—	—	—	—	1	1	—	—	—	—	1
Poliomyelitis ..	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—
Ophthalmia Neonatorum	13	13	—	—	—	—	—	—	—	—	—	—	—	4	—	4	2	1	2	—
Pulmonary Tuberculosis	234	1	—	—	1	2	12	15	30	91	40	34	8	30	19	39	44	46	56	—
Other forms of Tuberculosis ..	53	1	2	2	2	5	15	7	5	11	2	1	—	3	1	16	10	8	15	—
Totals ..	1,200	36	42	32	52	83	357	146	80	186	81	82	23	152	157	248	190	180	273	311

M. of H. TABLE III.

TABLE OF DEATHS during the Year 1925 in the Tottenham Urban Sanitary District, classified according to Diseases, Ages and Localities.

CAUSES OF DEATH.	Deaths at the subjoined ages of "Residents" whether occurring in or beyond the District														Deaths at all ages of "Residents" belonging to Localities, whether occurring in or beyond the District.					Total Deaths, whether of "Residents" or "non-Residents" in Institutions in the District.
	Deaths at the subjoined ages of "Residents" whether occurring in or beyond the District														Deaths at all ages of "Residents" belonging to Localities, whether occurring in or beyond the District.					
	All Ages.	Under 1 year.	1 and under 2.	2 and under 3.	5 and under 5.	5 and under 15.	15 and under 25.	25 and under 35.	35 and under 45.	45 and under 55.	55 and under 65.	65 and under 75.	75 and under 85.	85 and upwards.	Harringay.	West Green.	St. Ann's.	High Cross.	Middle.		Lower.
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	
Enteric Fever ..	2	—	—	—	1	—	—	1	—	—	—	—	—	—	—	—	1	—	1	—
Smallpox ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles ..	2	—	—	2	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—	—
Scarlet Fever ..	—	11	4	3	—	1	—	—	—	—	—	—	—	4	2	6	2	3	2	2
Whooping Cough ..	19	—	1	3	5	—	—	—	—	—	—	—	—	2	1	2	1	1	2	4
Diphtheria ..	9	—	—	—	—	—	—	—	—	—	—	—	—	3	2	8	2	7	4	1
Influenza ..	26	2	—	1	—	1	1	5	3	2	5	4	2	—	9	22	23	25	22	—
Erysipelas ..	4	—	—	—	—	—	—	—	1	6	—	—	—	—	2	1	5	1	4	—
Phthisis (Pulmonary Tuberculosis) ..	112	—	1	1	4	26	26	24	19	—	—	—	—	11	9	22	23	25	22	1
Tuberculous Meningitis ..	8	1	1	4	—	—	—	—	1	—	—	—	—	—	2	2	5	1	1	3
Other Tuberculous Diseases ..	19	1	1	5	3	1	5	3	1	—	—	—	—	1	2	5	5	1	5	—
Cancer, malignant disease ..	198	—	—	2	—	2	7	17	35	43	61	26	4	29	34	30	35	37	33	42
Rheumatic Fever ..	4	—	—	—	—	—	1	1	—	—	1	—	—	—	—	2	1	1	—	—
Meningitis ..	6	1	2	2	—	—	—	—	—	—	—	—	—	1	1	1	1	2	1	2
Heart Disease ..	296	1	—	—	7	8	8	13	23	42	91	78	25	39	42	61	54	45	55	23
Bronchitis ..	151	9	4	4	—	—	2	3	12	22	44	42	9	17	21	32	26	36	19	4
Pneumonia (all forms) ..	103	23	11	5	6	7	3	10	7	10	13	5	3	12	13	27	18	11	22	22
Other diseases of Respiratory Organs ..	18	—	—	1	1	1	—	1	2	—	1	1	—	1	2	3	4	6	2	—
Diarrhoea and Enteritis ..	16	8	1	—	1	3	1	—	—	—	—	—	—	2	—	1	4	5	4	—
Appendicitis and Typhlitis ..	10	—	—	—	4	—	—	—	—	—	—	—	—	2	—	2	—	2	4	—
Alcoholism ..	—	—	—	—	—	1	3	—	—	6	5	3	—	5	3	4	9	3	7	5
Nephritis and Bright's Disease ..	31	1	—	—	1	—	—	4	7	—	—	—	—	—	—	—	—	—	—	—
Puerperal Fever ..	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	2	—	1	—	—
Other accidents and diseases of Pregnancy and Parturition ..	6	—	—	—	—	1	2	2	1	—	—	—	—	—	—	—	—	—	—	—
Congenital Debility, Malformation, and Premature Birth ..	74	74	—	—	—	—	—	—	—	—	—	—	—	11	6	16	11	14	16	3
Violent Deaths, excluding Suicide ..	38	1	2	1	6	2	3	4	4	8	4	6	1	5	6	11	5	7	4	14
Suicide ..	20	—	—	—	—	1	2	2	2	—	4	1	—	—	3	4	3	3	4	2
Cerebro-Spinal Meningitis ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Defined Diseases ..	413	16	2	9	9	9	14	21	46	68	91	92	36	69	44	63	79	85	73	101
Diseases ill-defined or unknown ..	3	—	—	—	—	—	—	—	—	2	—	1	—	—	—	—	2	—	1	—
Encephalitis Lethargica ..	8	1	1	1	—	—	1	1	2	1	—	—	—	—	—	3	2	1	2	9
Totals ..	1596	150	31	44	50	64	80	116	165	223	330	263	80	220	193	309	290	298	286	308

M. of H. TABLE IV.— INFANTILE DEATHS in Ages, Sexes and Localities, during the year 1925.

CAUSE OF DEATH	Under 1 week.	1—2 weeks.	2—3 weeks.	3—4 weeks.	Total under 4 weeks.	1—3 months.	3—6 months.	6—9 months.	9—12 months.	Total Deaths under 1 year.	Males.	Females.	Harrington Ward.	West Green Ward.	St. Ann's Ward.	High Cross Ward.	Middle Ward.	Lower Ward.
Smallpox ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Chicken Pox ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever ..	—	—	—	—	—	1	3	2	5	11	7	4	2	2	5	—	1	—
Whooping Cough ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria and Croup ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas ..	—	—	—	—	—	—	—	—	1	1	1	—	—	—	1	—	—	—
Tuberculous Meningitis ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Abdominal Tuberculosis ..	—	—	—	—	—	1	—	—	—	1	1	—	—	—	—	1	—	—
Other Tuberculous Diseases ..	—	—	—	—	—	—	—	—	—	—	3	—	—	—	2	—	2	—
Meningitis (not Tuberculous) ..	3	1	—	—	4	1	—	—	—	5	—	2	—	—	—	—	—	1
Convulsions ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Laryngitis ..	—	—	—	—	—	4	—	—	—	—	—	—	—	—	—	—	—	—
Bronchitis ..	—	—	—	—	—	—	3	1	—	—	6	3	—	—	3	2	3	1
Pneumonia (all forms) ..	—	1	—	—	1	6	5	7	4	9	18	5	—	—	9	2	1	—
Diarrhoea ..	—	—	—	—	—	—	2	—	2	23	—	—	—	—	—	3	—	—
Enteritis ..	—	—	1	—	1	3	1	1	—	9	6	3	—	—	—	1	—	—
Gastritis ..	—	—	—	1	1	—	—	—	—	2	1	1	1	—	—	—	—	—
Syphilis ..	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—
Rickets ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Suffocation (Overlying) ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Injury at Birth ..	1	—	—	—	1	—	—	—	—	1	—	1	—	—	—	1	—	—
Atelectasis ..	2	2	—	—	4	—	—	—	—	4	—	4	—	—	—	3	—	—
Congenital Malformations ..	—	3	—	2	7	3	1	—	—	11	8	3	2	1	6	3	3	3
Premature Birth ..	21	4	2	1	27	2	6	—	—	29	18	11	6	3	8	3	5	6
Atrophy, Debility and Marasmus ..	4	2	4	1	11	8	—	—	2	27	16	11	1	1	1	3	5	9
Other Causes ..	7	1	—	1	9	3	2	1	—	15	8	7	3	2	3	2	4	1
Totals ..	40	14	7	5	66	33	23	12	16	150	95	55	18	14	38	23	27	30

EXTENDED SCHEDULE OF AGES AND CAUSES OF DEATH, YEAR 1925.

(Only those causes under which deaths were registered during the year are given in this Table.)

No.	CAUSE OF DEATH.	Total	Males.	Females.	Ages.														
					0 to 1	1 to 2	2 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 60	60 to 65	65 to 75	75 to 85	85 and upwards.
1-42	I. Epidemic, Endemic and Infectious Diseases																		
1	ENTERIC FEVER.																		
	(a) Typhoid Fever ..	2	—	2	—	—	—	1	—	—	—	—	1	—	—	—	—	—	—
7	Measles ..	2	1	1	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—
9	Whooping Cough ..	19	11	8	—	4	3	—	—	—	—	—	—	—	—	—	—	—	—
10	Diphtheria ..	9	3	6	—	1	3	4	1	—	—	—	—	—	—	—	—	—	—
11	Influenza ..																		
	1. With pneumonic complications ..	8	2	6	—	—	1	—	—	—	1	—	3	2	—	—	—	—	—
	(a) { 2. With other pulmonary complications ..	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	1. With non-pulmonary complications ..	9	3	6	1	—	—	—	—	—	—	1	1	—	—	1	4	—	1
	(b) { 2. Without stated complications ..	8	4	4	1	—	—	—	—	—	—	—	—	1	1	—	—	—	—
	cations ..	4	1	3	—	—	1	—	—	—	—	—	—	2	1	—	—	—	—
21	Erysipelas ..	8	2	6	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—
23	Encephalitis lethargica..	4	1	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
24	Meningococcal meningitis ..	8	2	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
31-37	TUBERCULOSIS (All Forms).																		
31	Respiratory system ..	112	70	42	—	1	1	1	3	14	12	26	24	19	4	2	5	—	—
32	Nervous system ..	8	7	1	1	1	4	—	—	—	—	—	1	1	—	—	—	—	—
33	Intestines and peritoneum ..	4	1	3	—	—	2	—	—	—	—	2	—	—	—	—	—	—	—
34	Vertebral column ..	1	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—
35	Joints ..	1	1	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
36	Other Organs ..																		
	(b) Bones (vertebral column excepted) ..	1	—	1	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—
	(d) Genito-urinary system ..	2	—	2	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—
	(e) Others in 36 ..	3	1	2	—	—	1	—	—	—	—	1	1	—	—	—	—	—	—
37	Disseminated tuberculosis																		
	(a) Acute ..	5	2	3	1	1	1	—	—	1	—	—	—	—	—	—	—	—	—
	(b) Chronic or unstated ..	2	2	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—
38	Syphilis ..	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
41	Purulent infection, septicaemia																		
	(2) Other forms ..	2	1	1	—	—	—	1	—	—	—	—	—	—	—	—	1	—	—

No.	CAUSE OF DEATH.	Total	Males.	Females.	Ages.														
					0 to 1	1 to 2	2 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 60	60 to 65	65 to 75	75 to 85	85 and up-wards.
89 90	HEART DISEASE—(contd.)																		
	(1) Infective endocarditis ..	6	4	2	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—
	(2) Other acute endocarditis ..	11	7	4	1	2	5	—	—	—	—	—	—	—	—	—	—	—	
	(3) Acute myocarditis ..	3	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Angina pectoris ..	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Other diseases of the heart ..	19	15	4	—	—	—	—	—	—	—	1	1	2	2	3	5	—	
	(1) Aortic valve disease ..	30	14	16	—	2	—	—	—	—	—	2	3	1	2	6	10	3	
	(2) Mitral valve disease ..																		
	(3) Aortic and mitral valve disease ..	32	15	17	—	1	1	—	—	—	—	1	2	—	4	1	8	9	
	(4) Other or unspecified valve diseases ..	12	5	7	—	—	—	—	—	—	1	—	—	—	—	1	3	4	
91	(5) Fatty heart ..	10	1	9	—	—	—	—	—	—	—	—	—	—	—	—	6	1	
	(6) Cardiac dilatation, cause unspecified ..	3	1	2	—	—	—	—	—	—	—	—	—	—	1	—	1	—	
	(7) Other or unspecified myocardial disease ..	99	44	55	—	—	—	—	—	1	—	—	1	4	2	9	35	31	
	(8) Disordered action of the heart ..	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	(9) Heart disease (undefined) ..	69	34	35	—	—	—	—	—	1	2	4	6	1	1	7	22	21	
	Diseases of the arteries ..	2	1	1	—	—	—	—	—	—	—	—	—	—	1	1	—	—	
	(a) Aneurism ..				—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	(b) Arterio-sclerosis ..				—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	(1) With record of cerebral vascular lesion ..	10	7	3	—	—	—	—	—	—	—	—	—	—	2	1	4	1	
	(2) Without record of cerebral vascular lesion ..	38	15	23	—	—	—	—	—	—	—	—	—	—	1	3	10	18	
97-107	(c) Other diseases of the arteries ..	3	1	2	—	—	—	—	—	—	—	—	—	—	—	—	2	—	
	V. Diseases of the Respiratory System																		
	Bronchitis ..	29	12	17	2	—	2	—	—	—	—	1	—	2	2	1	9	9	
	(a) Acute ..	42	28	14	—	—	—	—	—	—	—	—	1	2	1	6	19	11	
	(b) Chronic ..																		
	(c) and (d) Not stated whether acute or chronic ..	80	51	29	7	4	2	—	—	—	—	1	2	8	3	9	16	22	
	PNEUMONIA (All Forms)																		
	Broncho-pneumonia ..	57	33	24	21	10	4	3	—	1	1	—	3	1	1	1	7	3	

No.	CAUSE OF DEATH.	Total	Males	Females	Ages.													85 and up-wards.			
					0 to 1	1 to 2	2 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 60	60 to 65	65 to 75		75 to 85		
101	PNEUMONIA—(contd). Pneumonia (lobar and not otherwise defined (a) Lobar (b) Not otherwise defined	21 25	12 12	9 13	— 2	1 —	1 —	— 1	2 —	— —	— 2	— 3	2 1	5 2	3 3	2 —	1 5	2 4	2 —	— 2	
102	Pleurisy (1) Empyema (2) Other pleurisy	3 5	1 4	2 1	— —	— —	— —	— 1	— —	— —	1 —	— —	— —	— —	— 1	— —	— 1	— 1	— —	— 2	
103	Congestion and haemorrhagic infarction of lung	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
105	Asthma	5	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
106	Pulmonary emphysema	2	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
107	Other diseases of the respiratory system (c) Other diseases included under 107	2	1	1	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	
108-127	VI. Diseases of the Digestive System.																				
108	Diseases of the buccal cavity and annexa (1) Diseases of the teeth and gums	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	
109	Diseases of the pharynx and tonsils (1) Tonsillitis, etc., adenoid vegetation (2) Other diseases included under 109	4 2	2 2	2 —	— 1	— —	— —	1 —	1 —	— —	— —	1 1	— —	— —	1 —	— —	— —	— —	— —	— —	— —
111	Ulcer of the stomach or duodenum (a) Ulcer of the stomach (b) Ulcer of the duodenum	17 5	10 4	7 1	— —	— —	— —	— —	— —	— —	— —	— —	3 —	2 —	6 3	2 1	1 —	2 1	1 —	— —	— —
112	Other diseases of the stomach (1) Inflammation of the stomach (2) Other diseases included under 112	4 1	2 1	2 —	— —	— —	— —	— —	— —	— —	— —	— —	— —	— —	— —	— —	— —	— —	— —	— —	— —
113-114	Diarrhoea and enteritis (2) Colitis	2	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1

No.	CAUSE OF DEATH.	Total	Males.	Females	Ages.															
					0 to 1	1 to 2	2 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 60	60 to 65	65 to 75	75 to 85	85 and up-wards.	
	(3) <i>Other diseases included under 113-114</i> ..	14	6	8	8	1	—	1	—	—	2	1	—	1	—	—	—	1	2	—
117	Appendicitis and typhlitis ..	10	6	4	—	—	—	3	1	2	1	1	—	—	—	—	—	1	—	—
118	Hernia, intestinal obstruction																			
	(a) <i>Hernia</i> ..	10	6	4	—	—	—	—	—	—	—	—	—	—	—	—	—	3	1	—
	(b) <i>Intestinal obstruction</i> ..	7	3	4	—	—	—	—	—	—	—	—	—	—	—	—	—	3	—	—
119	Other diseases of the intestines..	2	—	2	1	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—
122	Cirrhosis of the liver ..																			
	(b) <i>Not returned as alcoholic</i> ..	5	3	2	—	—	—	—	—	—	—	—	—	—	4	—	—	1	—	—
124	Other diseases of the liver ..	5	2	3	—	—	—	—	—	—	—	—	—	—	2	—	—	1	2	—
	VII. Non-Puerperal Diseases of the Genito-Urinary System.																			
128	Acute nephritis (including unspecified under 10 years of age)	6	3	3	1	—	—	—	—	1	—	2	1	—	1	—	—	—	—	—
129	Chronic nephritis (including unspecified under 10 years of age)	25	10	15	—	—	—	—	1	—	—	1	3	7	2	3	5	3	—	—
131	Other diseases of the kidneys and annexa ..	4	4	—	—	—	—	—	—	—	—	—	—	—	1	2	1	—	—	—
132	Caleuli of the urinary passages..	1	—	1	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—
133	Diseases of the bladder ..																			
	(1) <i>Cystitis</i> ..	5	3	2	—	—	—	—	—	—	—	—	—	1	—	—	—	3	—	—
	(2) <i>Other diseases</i> ..	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
134	Diseases of the urethra, urinary abscess, etc. ..																			
	(a) <i>Stricture of the urethra</i> ..	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—
135	Diseases of the prostate ..	8	8	—	—	—	—	—	—	—	—	—	—	—	1	2	3	1	1	—
138	Salpingitis and pelvic abscess ..																			
	(1) <i>Salpingitis</i> ..	1	—	1	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—
139	Tumours of the uterus not returned as malignant ..	1	—	1	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—
	VIII. The Puerperal State																			
143-150	Accidents of pregnancy ..																			
143	(a) <i>Abortion</i> ..	3	—	3	—	—	—	—	—	—	—	1	2	—	—	—	—	—	—	—
144	Puerperal haemorrhage ..	2	—	2	—	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—
148	Puerperal albuminuria and convulsions ..	1	—	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—

No.	CAUSE OF DEATH.	Total.	Males	Females ²	Ages.														85 and up-wards.
					0 to 1	1 to 2	2 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 60	60 to 65	65 to 75	75 to 85	
163	(3) <i>Other diseases included under 162</i>	2	2	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—
164	Lack of care	5	2	3	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—
165-203	XIII. Old Age																		
165-174	(1) <i>Senile dementia</i>	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
165-166	(2) <i>Other forms of senile decay</i>	67	24	43	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
167	XIV. External Causes.																		
165-174	SUICIDE.																		
165-166	By solid or liquid poisons and corrosive substances ..	4	1	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
167	By poisonous gas	8	4	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
169	By drowning	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
171	By cutting or piercing instruments	5	4	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
173	By crushing	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
175-196	VIOLENT DEATHS, EXCLUDING SUICIDE AND HOMICIDE.																		
178	Conflagration	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
179	Burns (conflagration excepted)	3	—	3	—	2	1	—	—	—	—	—	—	—	—	—	—	—	—
182	Accidental drowning	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
185	By fall	10	4	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
187	By machinery	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
188	By other forms of crushing (vehicles, railways, etc.)	18	16	2	—	—	3	3	1	—	—	—	—	—	—	—	—	—	—
197-199	HOMICIDE.																		
198	By cutting or piercing instruments	1	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—
199	By other means	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
201	Fracture (cause not specified)	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
204-205	XV. Ill-Defined Diseases.																		
204-205	(2) <i>Other ill-defined causes</i>	2	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
204-205	(3) <i>Cause not specified</i>	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	TOTALS ..	1596	823	773	150	31	44	26	24	33	31	80	116	165	98	125	330	263	80

MALIGNANT GROWTHS.

CANCER.

Digestive System:—						Males.	Females.
Mouth	..	..	..	..	..	1	1
Tongue	..	..	..	..	..	5	—
Pharynx	..	..	..	..	..	1	—
Œsophagus	..	..	..	..	..	4	1
Stomach	..	..	..	..	..	19	14
Pylorus	..	..	..	..	..	1	3
Bowels (large and small intestines)	..	..	..	..	..	12	8
Rectum	..	..	..	..	..	8	10
Liver and Gall Bladder	..	..	..	..	..	3	5
Pancreas	..	..	..	..	..	2	4
Genito-urinary:—							
Kidney	..	..	..	..	..	4	1
Bladder	..	..	..	..	..	3	5
Penis	..	..	..	..	..	1	—
Prostate	..	..	..	..	..	3	—
Breast	..	..	..	..	..	—	22
Uterus	..	..	..	..	..	—	20
Ovary	..	..	..	..	..	—	3
Respiratory:—							
Nose	..	..	..	..	..	—	1
Tonsil	..	..	..	..	..	2	—
Larynx	..	..	..	..	..	5	—
Lung	..	..	..	..	..	6	4
Various:—							
Cutaneous (face and lips)	..	..	..	..	..	6	1
Mediastinum	..	..	..	..	..	2	1
Spleen	..	..	..	..	..	—	1

SARCOMATA.

Melanotic Sarcoma	..	..	..	..	1	—
Osteo-sarcoma	..	..	..	..	1	—
Thigh	..	..	..	..	—	1
Fibia	..	..	..	..	1	—
Frontal Linus	..	..	..	..	1	—
					—	—
					92	106
					—	—

VIOLENCE.

There were 58 deaths from Violence, including 20 which were suicidal.
In 1924, the number was 58, and in 1923, 56.

						Males.	Females.
Burnt to Death .. .. .	..	..	..	..	..	1	—
Scalding .. .. .	..	..	..	..	..	—	3
Drowning .. .. .	..	..	..	..	..	2	—
Falls:—							
From Building .. .. .	..	..	..	..	..	1	—
,, Ladder .. .. .	..	..	..	..	..	1	—
At Play .. .. .	..	..	..	..	..	1	—
Into Lift Pit .. .. .	..	..	..	..	..	1	—
Other .. .. .	..	..	..	..	..	—	6
Crushing by Floor of Lift .. .. .	..	..	..	..	..	1	—
Run over by Motor-Car .. .. .	..	..	..	..	..	1	—
,, Motor Lorry .. .. .	..	..	..	..	..	1	—
,, Steam Waggon .. .. .	..	..	..	..	..	1	—
,, Trailer .. .. .	..	..	..	..	..	2	—
,, Char-a-banc .. .. .	..	..	..	..	..	—	1
Collision of Motor and Van .. .. .	..	..	..	..	..	1	—
,, Motor-Car and Motor Bicycle .. .. .	..	..	..	..	..	1	—
,, Bicycle and Motor Lorry .. .. .	..	..	..	..	..	1	—
Knocked down by Motor Cycle .. .. .	..	..	..	..	..	1	—
,, ,, Motor-Bus .. .. .	..	..	..	..	..	1	—
,, ,, Motor Lorry .. .. .	..	..	..	..	..	2	—
,, ,, Train .. .. .	..	..	..	..	..	1	—
Struck by Tramcar .. .. .	..	..	..	..	..	1	—
Crushed between Buffer and Iron Post .. .. .	..	..	..	..	..	1	—
Cut Throat (infanticide) .. .. .	..	..	..	..	..	1	—
Other .. .. .	..	..	..	..	..	2	2

SUICIDES.

By Poisoning .. .. .	..	..	..	..	..	1	3
,, Coal Gas Poisoning .. .. .	..	..	..	..	..	4	4
,, Cut Throat .. .. .	..	..	..	..	..	4	1
,, Injuries by Train .. .. .	..	..	..	..	..	2	—
,, Drowning .. .. .	..	..	..	..	..	—	1
						—	—
						37	21
						—	—

Mortuary Table for the Year 1925.

Bodies Admitted.				No. of Post-Mortems.			No. of Inquests	Deaths from Violence	Deaths from Drowning
Month	Males	Females	Total	Males	Females	Total			
January ..	3	3	6	1	3	4	6	2	1
February..	2	5	7	1	5	6	7	3	—
March ..	2	7	9	—	6	6	9	3	—
April ..	7	6	13	6	5	11	13	3	1
May ..	3	2	5	1	2	3	5	4	—
June ..	5	3	8	4	2	6	8	2	—
July ..	6	1	7	4	1	5	7	7	—
August ..	5	3	8	5	3	8	8	5	1
September	8	6	14	8	4	12	14	—	1
October ..	8	3	11	7	3	10	11	3	—
November	7	5	12	6	4	10	12	4	1
December	6	7	13	4	6	10	13	3	—
Total ..	62	51	113	47	44	91	113	39	5

No. of bodies admitted to await Burial .. 37.

The following List gives the Causes to which Deaths were attributed by the Coroner or Coroner's Juries:—

Aneurism	1	Syphilis	1
Aorta, rupture of	8	Tumour on Kidney	1
Arteriosclerosis	1	<i>Suicides:—</i>	
Bronchitis	5	Poisoning	3
Cancer	1	Gas Poisoning	7
Convulsions	3	Hanging	1
Cerebral Haemorrhage	9	Cut Throat	5
Congestion of Lungs	1	Drowning	3
Gastric Ulcer	1	Killed on Railway	1
Haemorrhage	3	<i>Accidents:—</i>	
Inanition	1	Burns	1
Inattention at Birth	4	Run over by Motor	10
Marasmus	3	Run over by Tramcar	1

Nephritis 1	Drowning 2
Pneumonia 6	Knocked down by Motor .. 3
Septicaemia 2	Fall from Scaffold 1
Still-Born 2	Fall down Lift Shaft 1
Status Lymphaticus .. 1	Fall Downstairs 1
Syncope 14	Scalding 4

The amount of Poor Law Relief; the extent to which hospital and other forms of gratuitous medical relief are utilised.

The following information has been kindly supplied by the Clerk of the Guardians:—

Out-Door Relief.

Unemployed :		Ordinary :	
No. of Cases,	Amount,	No. of Cases,	Amount,
1,994.	£17519.	1901.	£51568

North Middlesex Hospital.

No. of cases admitted during 1925,	2,245
No. of days In-maintenance during 1925,	94,895

Any causes of sickness or invalidity which have been specially noteworthy in the area during the period under review; and any conditions of occupation or environment which appear to have had a prejudicial effect on health.

There have been no such noteworthy conditions, beyond the inadequate housing provision, which must have had a prejudicial effect on the health of those subjected thereto. It is not, however, reflected in the vital statistics.

INFECTIOUS DISEASES GENERALLY.

Smallpox.—No case of Smallpox has been notified in Tottenham in the period 1920 to 1925. From time to time, intimation is received of contacts with Smallpox cases elsewhere coming to visit or reside in this area. These contacts are visited and kept under scrutiny for the requisite period of a fortnight or more, but in no instance have they developed the disease.

The Vaccination Officer for Tottenham informs me that the number of Tottenham children vaccinated during 1925 was 933; the number of declarations of conscientious objection to vaccination received was 1,196.

* * * *

The following table shows the incidence of notifiable infectious diseases for the period 1920—25:—

NOTIFICATION OF INFECTIOUS DISEASES, 1920—1925.

	Cases Notified.					Deaths.					Death Rates.							
	1920	1921	1922	1923	1924 . 1925	1920	1921	1922	1923	1924	1925	1920	1921	1922	1923	1924	1925	
Dysentery	3	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	
Encephalitis Lethargica	7	6	2	4	31	17	1	2	1	2	7	8	.006	.013	.006	.012	.04	.051
Diphtheria (including Mem. Croup) ..	492	561	400	194	227	252	41	49	45	8	5	4	.26	.33	.29	.05	.03	.025
Erysipelas ..	51	65	35	43	22	44	1	4	1	2	1	4	.006	.027	.006	.012	.006	.025
Scarlet Fever ..	596	1062	919	385	367	427	7	6	6	3	—	—	.04	.04	.03	.019	—	—
Enteric Fever ..	1	4	6	2	6	2	—	1	1	—	1	2	—	.006	.006	—	.006	.012
Malaria ..	45	5	5	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia ..	218	180	352	200	217	149	145*	102*	155*	118*	125*	104*	.92	.65	1.0	.76	.80	.66
Puerperal Fever ..	8	5	6	3	5	6	4	3	2	4	3	—	.02	.02	.013	.025	.019	—
Cerebro-spinal Meningitis ..	3	1	—	1	—	2	3	—	—	5	—	2	.01	—	—	.032	—	.012
Poliomyelitis ..	4	2	—	2	1	1	—	—	—	—	—	—	—	—	—	—	—	—
Ophthalmia Neonatorum ..	32	29	15	15	12	13	—	—	—	—	—	—	—	—	—	—	—	—
Pulmonary Tuberculosis ..	342	258	254	242	231	234	133	119	125	113	124	112	.85	.79	.82	.73	.79	.71
Other forms of Tuberculosis ..	71	54	64	49	44	53	23	37	30	25	28	27	.14	.25	.19	.15	.18	.17
Measles ..	1164	166	2658	—	—	—	15	1	23	6	22	2	.09	.007	.15	.03	.14	.012

*It is to be noted that whereas only Acute Primary Pneumonia and Influenzal Pneumonia are notifiable and recorded above, the deaths and death-rates refer to deaths returned as due to all forms of Pneumonia.

Measles was notifiable during the first three of the six years for which figures are given in the table. With the reduction in numbers of cases of Scarlet Fever sent to hospital from Tottenham, the Metropolitan Asylums Board have been willing to admit complicated cases of Measles and Whooping Cough for whom institutional treatment was desirable. Thus 7 cases of Measles and 15 of Whooping Cough received hospital treatment in 1925.

The complications in these institutionally-treated cases were as follows:—Measles and Pneumonia, 5; Measles and Meningitis, 1; Measles (In-patient, General Hospital), 1. Whooping Cough and Pneumonia, 13; Whooping Cough and Bronchitis, 1; Whooping Cough and Congestion of the Lungs, 1.

Tuberculosis.—The County Council are responsible for the treatment of Tuberculosis. Notifications are made to the Medical Officer of Health of the District, who forwards the information respecting them to the County Medical Officer of Health.

The Tottenham Tuberculosis Officer has his premises at 140, West Green Road. The days and hours of attendance at the Dispensary are as follows:—

Monday, Men, 10 a.m.; Tuesday, Women, 10 a.m.; children, 2.30 p.m. Wednesday, Women, 10 a.m.; cases who are working and unable to attend during the day, 7 p.m. Thursday, Children, 10 a.m. Friday, Men, 10 a.m.

The number of persons suffering from Tuberculosis (all forms) appearing on the Register is 1,053. This number may be regarded as fairly accurate, as all cases have been recently visited or otherwise accounted for by the Tuberculosis Officer and the Medical Officer of Health. The declension in the Incidence Rate and Death-Rate is considerable. The Pulmonary form of Tuberculosis ranks first amongst notifiable infectious diseases for its killing propensity, with Pneumonia following closely and, in times of Influenza prevalence, surpassing it.

TUBERCULOSIS.

Age Periods.	New Cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	Males	Females	Males	Females	Males	Females	Males	Females
Under 1 year ..	—	1	1	—	—	—	2	—
1 to 5 years..	3	—	3	8	1	1	7	4
5 to 10 ,, ..	6	6	7	8	1	—	1	—
10 to 15 ,, ..	7	8	3	4	2	1	—	2
15 to 20 ,, ..	12	18	3	2	8	6	1	—
20 to 25 ,, }	30	61	5	6	4	8	—	—
25 to 35 ,, }					14	12	1	4
35 to 45 ,, ..	31	9	2	—	18	6	2	2
45 to 55 ,, }	25	9	1	—	13	6	1	—
55 to 65 ,, }				—	4	2	—	—
65 and over ..	3	5	—	—	5	—	—	—
Totals ..	117	117	25	28	70	42	15	12

Organs Affected (New Cases):—

						Males.	Females.
Lungs	..	..	..	..	..	115	116
Meninges	..	..	..	..	..	—	1
Wrist	..	..	..	..	..	1	—
Spine	..	..	..	..	..	4	4
Bones	..	..	..	..	..	—	1
Foot	..	..	..	..	..	1	—
Hip ..	..	..	..	..	..	5	4
Knee ..	..	..	..	..	..	2	4
Peritoneum	..	..	..	..	..	4	4
Abdomen	..	..	..	..	..	2	1
Other ..	..	..	..	..	..	6	9
Dual Organs :—							
Lungs and Kidneys			..	..	..	1	1
Lungs and Abdomen			..	..	..	1	—
						—	—
						142	145
						—	—

Dysentery and Malaria.—In respect of Dysentery and Malaria, no notifications have been received for the past 2 years, and no deaths have been attributed to these causes for the past 6 years.

Ophthalmia Neonatorum.—The early notification of Ophthalmia Neonatorum has undoubtedly been effectual in preventing the loss of, or damage to, sight of many children. Prompt “following up” and insistence on immediate and thorough treatment has resulted in there being no damage to the eyes of the patients notified during the past 12 months.

Puerperal Fever.—There has been no reduction in the number of cases of Puerperal Fever notified, but there is a gratifying reduction in the case mortality in 1925. No maternal deaths were recorded from this cause.

Poliomyelitis remains sporadic in its incidence, and has not assumed fatal form in any instance for the 6 years under review.

Cerebro-Spinal Fever, although also sporadic in its visitation, continues to take its toll of life. In 1923, it will be observed that although only 1 case was notified in the District, 5 deaths occurred of persons belonging to the District.

Encephalitis Lethargica.—This disease has, for the past 2 years, shown a marked exacerbation both in its incidence and fatality. Of the 17 cases notified in 1925, 10 were “resident” in the High Cross Ward; 2 of the 10, however, occurred in the Prince of Wales’s Hospital. Duplicate cases have not been recorded, and so little is the disease considered to be infectious, that patients in hospital are allowed to remain in the General Ward; and only one case was removed from home to hospital, on account of domestic circumstances.

The following particulars were ascertained for the Board of Education in relation to young persons who had suffered from Encephalitis Lethargica:—

V. L.—Left school and at work since January, 1924, since when she has been to two situations. Appears not to have worked satisfactorily at first place. Attended Prince of Wales’s Hospital from time of diagnosis until Christmas, 1924. Glasses prescribed. Mother states that there is still slight strabismus. Depression still present, but no sleepiness.

F. G.—Was an in-patient, West End Hospital for Nervous Diseases, for 14 weeks; is still very ill. Is always tired, but does not sleep a great deal as she suffers from severe pains in head, which increase when gas is lit and continue to be severe during night, preventing sleep. Walks better than she stands, but tends to walk sideways. Drags legs. Often falls backwards when standing. Memory good. No squint or diplopia now, but says she can often see lights flashing before her eyes. No mental symptoms. Pupils react to light, but not accommodation. No Rhomberg sign. Speech slow. Happy, not depressed.

K. B.—Scarlet Fever followed by Encephalitis Lethargica, and that by Enteric Fever. Treated for Encephalitis Lethargica at Evelina Hospital, and transferred from there to Isolation Hospital, where she contracted Enteric. Walks sideways, and gait slightly unsteady. Falls if she turns quickly. Has lost confidence in herself. Mentally no change, except that she is easily depressed. No untimely sleepiness; sleeps well at night. Reflexes normal. Pupils react to light and accommodation. Complains that at times L. hand and L. leg get "fixed."

A. T. C.—Attending school. Resumed attendance 12 months after attack. In good health, except for periodic (infrequent) violent attacks of headache and night terrors and that he is somewhat nervous. Was very ill at time of attack, apparently comatose. Was in-patient, Hampstead Hospital. Mentally quite alert.

E. E.—Almost constant violent tremors of left upper extremity; no paralysis. Walks well, but gait a little peculiar and tires easily. Reflexes active. Speech very slow and scanning. Sleep varies, some insomnia. Eyes frequently become fixed with a stare. Appetite good. Mentality, etc., unimpaired. Is under National Hospital for Paralysis, and is shortly going to Convalescent Home. (May, 1926.—Been in Convalescent Home. Improved, but speech still affected, and tremors, etc., occasionally present).

N. B.—Was in-patient, M.A.B., Hospital, June—July, 1924, for 7 weeks. Under private doctors since. Weakness of muscles of back and neck present. Can only walk a few hundred yards and then is fatigued; and when walking, is said to walk on toes—sideways—and to bend body forwards. Tends to run. Often falls forwards when standing. No visual defects. Is occasionally depressed. Temper uneven, but was so before illness. Memory good; appetite good. Sleeps well. Speech slow and slurring. Reflexes somewhat sluggish.

J. G.—Mentally unbalanced since attack. Was in-patient, General Hospital for 5 weeks. Has been under observation of School Medical Officers since 1922, when he had to be excluded from ordinary elementary school. Was then found to be mischievous, very excitable, uncontrolled and spiteful, etc., and unmanageable at home. Was transferred to Special (Residential) School, but after a short period had to be discharged from there on account of being unmanageable and vicious in habits. Has now been dealt with by Medical Officer under Mental Deficiency Act, and is an inmate of an institution.

G. W. (4-6-26).—Attack of Encephalitis Lethargica about a year ago. In-patient, National Hospital for Paralysis. Now mentally and physically changed. Has become spiteful and untruthful. Legs weak, and cannot walk far. Face immobile; mouth open; eyes, fixed stare. All movements sluggish. Speech very slow.

Enteric Fever.—Two cases were notified in 1925, and both were removed to hospital. One of these proved fatal. A second death from Enteric Fever was debited to this District, and related to a female adult—an inmate of Napsbury Asylum.

Facility is afforded for the verification of diagnosis by Widal's test at the Laboratories of the Prince of Wales's Hospital.

Erysipelas.—For the hospital treatment of patients suffering from Erysipelas, we are indebted to the Enfield and Edmonton Joint Hospital Board. Dr. Haldane Cook, of that Institution, has come to Tottenham's aid generously when, but for the hospitality of his Board, Tottenham's patients in need of institutional care would have been deprived of that advantage. Of the 44 cases notified, 12 were removed to hospital, and 32 were nursed at home.

Diphtheria.—The "peak" in respect of the incidence of this disease was reached in 1921, with 561 notifications. The notifications in 1923 were 194, the "trough" of the wave—almost exactly one-third of that of the "peak" year. The number of deaths, and the Death-Rate, were correspondingly high in 1921. Although since 1923 there has been an increase in the numbers notified, there has been a steady declension in the deaths and Death-Rate; so that for 1925, with 4 deaths and a Death-Rate of .025 per 1,000 of the estimated population, the mortality has been the lowest for the past 6 years—the period under review. 36 cases removed to hospital, supposed to be suffering from Diphtheria, were

subsequently found to be wrongly diagnosed. The corrected diagnoses (as supplied by the hospitals) were:—Tonsillitis, 20; ‘‘Not Diphtheria,’’ 5; Vincent’s Angina, 3; Erythema, 1; Bronchial Catarrh, 1; Catarrh, 1; Stomatitis, 1; Lobar Pneumonia, 1; Scarlet Fever, 1; Cardiac Irregularity, 1; Gingivitis and Pyorrhoea, 1.

Of the 252 notified cases, 227 were removed to hospital.

Bacteriological examination of swabs for the presence of the Diphtheria organism is undertaken at the Health Department’s Laboratory. 1,994 swabs were examined, and 255 proved to be positive. Where successive swabs prove the continuance of the presence of Diphtheria Bacilli, virulence tests are made for the department by the Prince of Wales’s Hospital Pathologist.

Scarlet Fever.—Reviewing the incidence of Scarlet Fever for each of the past 6 years, it will be noted that the year 1921 showed a very marked accentuation. The incidence of the disease reached its low level in 1924, and in this instance—as in the case of Diphtheria—the numbers notified were practically as 3 to 1; and again, it is to be noted that the deaths and Death-Rate have shown a steady declension, so that for the past 2 years there has been no mortality at all.

During the period under review a reversal of policy has taken place in Tottenham with regard to Scarlet Fever administration. The 1921 epidemic proved that in time of real stress the hospital accommodation available for Tottenham patients was totally inadequate, and in April, 1922, resort was had to other means than hospitalisation of handling the epidemic. Nurses were appointed to treat patients in their own homes, and thus pressure on hospital beds was relieved. The experience gained by the experiment thus forced upon us indicated that for a large proportion of Scarlet Fever patients institutional treatment was unnecessary, so far as the illness was concerned. In some respects, treatment at home had advantages over hospital treatment, notably in the avoidance of cross infections. The menace attaching to the retention of Scarlet Fever patients in their own homes is the occurrence of secondary cases—one that must be admitted. On page 48 are set forth the details of the cases treated at home during 1925.

In order to obviate the occurrence of secondary cases, recourse was had, in 1924, to the use of Scarlet Fever anti-toxin for the inoculation of susceptible contacts. A passive immunity appears to be conferred for a period of about a fortnight by the intramuscular injection of 5 c.cm. concentrated serum. The susceptibility to the disease is thus postponed

only, but not for a sufficient period to cover the infectivity of Scarlet Fever patients having nose or ear discharge, nor the interval occupied by the occurrence of intermediate cases. Thus, in two instances, the events were as follows:—On the notification of a primary case, susceptible contacts were inoculated. The mothers, however, declined inoculation. The mothers contracted the disease from the primary cases (presumably), and the inoculation of the contacts was found to be incapable of protecting them against the extended period covered by the mothers' illness. Under domiciliary conditions, where there is prolonged and intimate contact between susceptible persons and infective persons, passive immunisation on the scale employed will not prove effectual. But where the relations are less intimate and less prolonged, advantage may be gained from passive immunisation of contacts. This is exemplified in the case of a school where cases of Scarlet Fever were occurring in certain classes with disquieting frequency. Efforts to identify the infective child, or children, were unavailing. Resort was had to inoculation of the susceptible children in the classes affected. About 50 per cent. of the parents consented to the inoculation of their children attending the classes concerned. These immunised children were spaced in their classes alternately with the others. For a fortnight thereafter there was an entire cessation of the trouble, and subsequently the cases notified as occurring amongst the children attending this school were in proportion to the cases notified generally throughout the District. None of the inoculated children contracted the disease.

The Council has quite definitely adopted the home treatment of Scarlet Fever as their policy, except in instances where that is precluded for cogent reasons. The use of the Scarlet Fever toxin, a vaccine of the organism—or both—as *active* immunising agents, is the direction that, at the moment, gives promise of most beneficial results in the protection of susceptible persons; and with that addition to the armamentarium of the Public Health Services, the need for hospitalisation of mild cases of Scarlet Fever would be further reduced.

As an antidote to Scarlet Fever poison, Scarlatinal Anti-toxin is receiving favour. It is difficult, however, to gauge its efficacy accurately, since the type of Scarlet Fever now met with is so mild, as a rule; and in these cases in which serum is administered early—as it should be—and the patient runs a mild course, it cannot be determined whether the illness was originally of a mild type or whether the serum modified its severity. So mild is the ailment as at present seen, that frequently diagnosis is not made until desquamation appears, and the illness is

traced back to some slight indisposition; or the occurrence of a recognised case causes search to be made, and the primary (unnotified) case is found to be desquamating. The very mildness of the disease is the greatest hindrance to its recognition and the application of appropriate measures.

Disinfection of premises is not carried out as a routine measure. No reliance is placed on it as a means of arresting the spread of infection. When disinfection is asked for, it is not refused; but the request is acceded to only because of the sense of security it gives to those who ask for it, and not because any reliance is reposed in its efficacy.

The number of Scarlet Fever cases notified in the district in 1925 was 427.

68 patients were removed to hospital (including 5 who received a few days' period of treatment by the Council's Nurses prior to removal). 355 patients were treated to a conclusion by the Council's Nurses and 4 were treated privately in their own homes. 4 of the cases removed to hospital were wrongly diagnosed, 3 being Tonsillitis and 1 Abscesses.

The 360 patients treated by the Council's Nurses in their own homes were distributed as follows:—

272 premises in which 1 case occurred = 272 cases.	
31 premises in which 2 cases occurred = 62 cases.	
7 premises in which 3 cases occurred = 21 cases.	
1 premises in which 5 cases occurred = 5 cases.	
—	—
311 premises.	360 cases.

Multiple Home Cases, 1925:—

No. occurring within 1 week after previous case	..	26*
„ „ 2 weeks	„ „	6
„ „ 3 „	„ „	5
„ „ 4 „	„ „	5
„ „ 5 „	„ „	3
„ „ 6 „	„ „	2
„ „ 10 „	„ „	1
„ „ 11 „	„ „	1
		—
		49†
		—

*In 12 of these instances, dual notifications were received simultaneously, and in 2 instances triple notifications.

†This number includes certain cases wrongly diagnosed.

Number of cases removed to hospital after treatment commenced	..	5
Number of notifications withdrawn	.. .. .	4
Number of cases wrongly diagnosed or indefinite	.. .. .	27
There were complications in 53 of the cases (including cases wrongly diagnosed or indefinite).		

The complications were as follows :—

Rhinorrhoea	.. .. .	3
Otorrhoea	.. .. .	3
Glands	.. .. .	*21
Albuminuria	.. .. .	9
Rheumatism	.. .. .	2
Gland and Rheumatism	.. .. .	1
Albuminuria and Glands	.. .. .	6
Albuminuria and Rheumatism	.. .. .	3
Mastoid	.. .. .	2
Glands and Otorrhoea	.. .. .	2
Glands, Otorrhoea and Rheumatism	.. .. .	1
		—
		53
		—

* None of these suppurated.

Cases of Otorrhoea and Rhinorrhoea of long-standing before the onset of Scarlet Fever have been excluded, but all cases that have been definitely associated with Scarlet Fever have been included in this list.

All cases of complications arising in the course of Scarlet Fever have been periodically visited, and at the date of writing the Report (April, 1926) they had cleared up.

We have no means of ascertaining the frequency with which cases treated in hospital contract secondary diseases or other complications.

The Infectious Disease (Notification) Act, 1889, Section 3, reads as follows :—

“Where an inmate of any building used for human habitation
“within a district to which this Act extends is suffering from an infectious
“disease to which this Act applies, then, unless such building is a hospital
“in which persons suffering from an infectious disease are received, the
“following provisions shall have effect, that is to say—
“every medical practitioner attending on or called in to visit the patient,
“shall forthwith, on becoming aware that the patient is suffering from
“an infectious disease to which this Act applies, send to the Medical
“Officer of Health for the district a certificate stating the name of the
“patient, the situation of the building, and the infectious disease from
“which, in the opinion of such medical practitioner, the patient is
“suffering.”

Hence, notifications are not received of infectious diseases contracted in the Metropolitan Asylums Board Isolation Hospitals.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

HOSPITALS PROVIDED OR SUBSIDISED BY THE LOCAL AUTHORITY OR BY THE COUNTY COUNCIL.

(1) *Tuberculosis*.—Provided by the County Council; Harefield Sanatorium. Subsidised by the County Council; Clare Hall Sanatorium.

(2) *Maternity*.—Maintenance charges of patients paid by Local Authority; North Middlesex Hospital and Mothers' Hospital, Clapton.

(3) *Children*.—Maintenance charges paid by Local Authority; Prince of Wales's Hospital, North Middlesex Hospital, Central London Throat, Nose and Ear Hospital.

The London Heart Hospital receives fees for cases submitted for special examination. The Local Authority contribute towards the maintenance of children admitted to the London Orthopaedic Hospital, Great Ormond Street Hospital and Queen's Hospital, Hackney Road.

(4) *Fever*.—The Metropolitan Asylums Board hospitals provide accommodation for Tottenham patients, and the Enfield and Edmonton Joint Hospital Board have voluntarily accepted Erysipelas cases from Tottenham.

(5) *Smallpox*.—Tottenham is a contributory Authority to the Middlesex Districts' Joint Smallpox Hospital Board.

AMBULANCE FACILITIES.

The M.A.B. provide ambulances for the conveyance of infectious diseases.

The Local Authority provide and maintain 5 ambulances for non-infectious and accident cases. These are garaged at the Central Fire Station (telephone "Tottenham 100" and "Mountview 100"), and are available, day and night, free of charge to Tottenham residents for removal to hospitals in the District or to the hospitals in the Metropolitan area. For the conveyance of patients home from the Metropolitan hospitals, the charge is 5s., and from the North Middlesex Hospital, 2s. 6d.

The Ambulance Service began in 1915, and the following table shows to what extent it has been taken advantage of:—

MOTOR AMBULANCE SERVICE, 1925.

	No. of Cases.		Mileage.	Receipts.					
	Surgical.	Defective Children.		From Cases.			From T.E.C.		
				£	s.	d.	£	s.	d.
January ..	597	1,427	4,984	9	14	6	112	8	0
February ..	591	1,750	4,933	11	17	0	128	9	0
March	719	1,977	5,474	9	19	6	143	10	0
April	592	1,249	4,397	9	8	6	92	10	0
May	621	1,740	5,466	19	13	3	135	19	0
June	562	1,530	5,001	13	19	6	117	3	0
July	562	1,351	4,886	23	5	3	114	0	0
August ..	432	453	2,662	9	18	0	38	13	0
September ..	483	1,839	4,981	10	0	0	140	9	0
October ..	540	1,765	5,405	16	11	6	128	4	0
November ..	491	1,931	5,185	12	4	9	138	3	0
December ..	497	1,511	4,452	7	13	6	108	2	0
Year's Totals..	6,687	18,523	57,826	154	5	3	1397	10	0

25,210

Treasurer's Dept. ..

£1551 15 3

£123 10 0

£1675 5 3

Total Cases from 1915 to Date:
742,769.

Total Mileage to Date:
250,673.

The Ambulances are equipped with Oxygen apparatus which have been in use on 7 occasions during 1925; in 6 of the cases it was successful.

LABORATORY.

At the Town Hall Laboratory, 1,994 swabs from the throats or noses of persons in contact with sufferers from Diphtheria, or themselves supposed to be suffering from Diphtheria, and 300 specimens of sputum from persons suspected to be suffering from Consumption, have been examined during the year. Of the swabs, 255 were positive, and of the sputa, 48 specimens.

Other bacteriological and serological examinations are made by arrangement with the Prince of Wales's Hospital.

CLINICS AND TREATMENT CENTRES.

Name and Situation.	Nature of Accommodation.	By whom Provided.
Infant Welfare Clinic, "The Chestnuts," St. Ann's Road, N.15	Consulting Room, Weighing Room, Waiting and Stock Room, Pram Room	Tottenham Maternity and Child Welfare Commit- tee.
Infant Welfare Clinic, Bruce Castle, Lordship Lane, N.17	Consulting Room, Weighing Room, Waiting and Stock Room, Pram Room	Do.
Infant Welfare Clinic, Town Hall, N.15	Weighing Room and Waiting Room	Do.
Maternity Clinic, "The Chestnuts"	Consulting Room, Dressing Room, Waiting Room, Dining Room	Do.
Maternity Clinic, Bruce Castle	Consulting Room, Dressing Room, Waiting Room	Do.
Day Nursery, 240, St. Ann's Road	Receiving Room, Dining Room, and Nursery for Toddlers; 2 Nurseries for Infants; Isolation Room; Shelter in Garden	Do.
Minor Ailments Clinic, Town Hall	Consulting and Treatment Room and Waiting Room	Tottenham Education Com- mittee
Minor Ailments Clinic, Bruce Castle	Consulting Room, Treat- ment Room and Waiting Room	Do.
Dental Clinic, Bruce Castle	Surgery, Recovery Room and 2 Waiting Rooms	Do.
Dental Clinic, "The Chestnuts"	Surgery, Recovery Room and Waiting Room	Do.
Eye Clinic, Bruce Castle	Dark Room, Treatment, Fit- ting and Waiting Rooms	Do.
Ear Clinic, Bruce Castle	Treatment Room and Waiting Room	Do.
Spray Bath Clinic, Town Hall	Bath Room and Waiting Room	Do.
Tuberculosis Dispensary, 140, West Green Road, N.15	Consulting Room, Dressing Room, Waiting Room, Laboratory, Office	Middlesex County Council.
Venereal Diseases Clinic, Prince of Wales's Hos- pital, N.15	Two Consulting Rooms, Two Treatment Rooms, 2 Wait- ing Rooms and Laboratory	Do.

PROFESSIONAL NURSING IN THE HOME.

(a) *General*.—The District Nursing Association has no branch in Tottenham. For the purpose of giving nursing care to the sick in their own homes, the Central Council for District Nursing in London have made the following arrangements for dealing with Tottenham cases:—

1. The area on the eastern side of the London & North Eastern Railway line, and extending northwards as far as Lansdowne Road, undertaken by the Hackney District Nursing Association, 6 and 8, Lower Clapton Road, E.5. (Telephone, Clissold 929).

2. The area on the western side of the Railway line, and extending northwards as far as Lordship Lane (excepting St. Ann's Parish), undertaken by the North London Nursing Association, 413, Holloway Road, N.7. (Telephone, North 3548).

3. The area extending northwards from Lordship Lane and Lansdowne Road, undertaken by the Sisters of Charity of St. Vincent de Paul, 15, Church Street, Edmonton, N.9. (Telephone, Tottenham 3166).

(b) *Infectious Diseases*.—Five nurses are engaged by the Local Authority for the treatment of Scarlet Fever patients in their own homes.

The Local Authority undertake to subsidise the 3 Nursing Associations mentioned above in respect of treatment given to children suffering from Pneumonia, Influenza, Measles, Whooping Cough and Ophthalmia Neonatorum.

(c) *Midwives*.—The supervision of Midwives is exercised by the County Council. No subsidy is given to any individual Midwives by the Local Authority to enable them to carry on their practices in Tottenham; but necessitous women have the Midwives' fees paid in whole or in part by the Maternity and Child Welfare Committee after sources of income have been ascertained, and it appears to the Committee that the circumstances warrant payment of the Midwives from the public purse.

18 Midwives are registered for practice in the area.

HEALTH WEEK.

It has been the custom during the past 4 years for Health Week to be observed in the District by the setting of subjects to be written upon by the schoolchildren. A digest of 5 essays is fixed for each year, and for the year 1925 the subjects for consideration were:—(a) "How our food supply is safeguarded"; (b) "How to ensure the purity of drinking water"; (c) "My teeth"; (d) "Carriage and exercise"; (e) "Some facts about our clothing." 12,713 essays were written, and 26 prizes

and 4 certificates were distributed to the successful competitors at a Public Meeting held on 2nd December at the Municipal Hall.

STATUTES, BYE-LAWS, ETC., ADMINISTERED BY HEALTH DEPARTMENT.

The Health Department is mainly concerned with carrying out the provisions of the following Acts, Bye-Laws, Orders and Regulations.

From time to time, the Ministry of Health issue circulars relating to matters of outstanding importance, *e.g.*, Cholera, Smallpox, Cerebro-Spinal Meningitis, Diarrhoea, Anthrax, Rabies, etc. These circulars are not enumerated in the following list:—

- Public Health Act, 1875.
- Contagious Diseases (Animals) Acts, 1878 and 1886.
- Dairies, Cowsheds and Milkshops Order, 1885.
- Infectious Disease (Notification) Act, 1889. (Adopted, 5/11/89).
- Infectious Disease (Notification) Extension Act, 1899.
- Infectious Disease (Prevention) Act, 1890. (Parts adopted, 16/12/90).
- Public Health Acts Amendment Act, 1890. (Parts adopted, 20/1/91).
- Housing of the Working Classes Acts, 1890, etc.
- Tottenham Local Board Act, 1890.
- Cleansing of Persons Act, 1897.
- Tottenham Urban District Council Act, 1900.
- Factory and Workshop Acts, 1901, etc.
- Notification of Births Acts, 1907. (Adopted, 17/12/07).
- Public Health Acts Amendment Act, 1907. (Parts adopted, 17/12/09).
- Diphtheria Anti-toxin (Outside London) Order, 1910.
- Public Health (Tuberculosis) Regulations, 1911 and 1912.
- Rag Flock Act, 1911.
- Public Health (Cerebro-Spinal Fever and Acute Poliomyelitis) Regulations, 1912.
- Public Health (Milk and Cream) Regulations, 1912.
- Shops Acts, 1912, etc.
- Fabrics (Mis-description) Act, 1913.
- Public Health (Ophthalmia Neonatorum) Regulations, 1914.
- Public Health (Shell-fish) Regulations, 1915.
- Rent and Mortgage Interest Restrictions Acts, 1920 and 1923.
- Public Health (Acute Encephalitis Lethargica and Acute Polio-Encephalitis) Regulations, 1918.

Public Health (Pneumonia, Malaria, Dysentery, etc.) Regulations, 1918.

Milk and Dairies (Amendment) Act, 1922.

Milk (Special Designations) Order, 1923.

Public Health (Meat) Regulations, 1924.

Housing Act, 1925.

Public Health Act, 1925.

Bye-Laws with respect to New Streets and Buildings, Cleansing of Cisterns, Common Lodging-Houses, Houses let in Lodgings, Nuisances, Slaughter-Houses, Tents, etc., used for human habitation.

SHOPS ACTS, 1912 to 1921.

HALF HOLIDAYS.

Harringay Area.

Tottenham Remainder Area.

**Butchers* .. Monday, 1 p.m. Monday, 1 p.m.
(or alternatively Saturday, 1 p.m.) (or alternatively Saturday, 1 p.m.)

Bakers .. Wednesday, 2 p.m. Thursday, 2 p.m.
(or alternatively Saturday, 2 p.m.) (or alternatively Saturday, 2 p.m.)

†*Other Shops* Wednesday, 1 p.m. Thursday, 1 p.m.
(or alternatively Saturday, 1 p.m.) (or alternatively Saturday, 1 p.m.)
(non-exempted trades).

EVENING CLOSING HOURS.

* <i>Butchers</i>	..	..	Monday	..	..	..	..	..	1 p.m.
			Tuesday, Wednesday and Thursday	..					7 p.m.
			Friday and Saturday	..	..	..			8 p.m.

Confectioners .. Monday, Tuesday, Wednesday, Thursday and Friday 9.30 p.m.

Saturday 10 p.m.

Sunday 8 p.m.

† <i>Other Shops</i>	..	Monday, Tuesday, Wednesday, Thurs-				
(non-exempted trades)		day and Friday	..	..	..	8 p.m.

Saturday 9 p.m.

Sunday 8 p.m.

(subject to weekly half-holiday Order).

Refreshments .. Special Licences .. 10 p.m. and 11 p.m.
(consumed on premises)

Exempted Trades .. No closing hour.
(newly cooked provisions, etc.)

LEGAL PROCEEDINGS.

Date.	Name.	Nature of Case.	Result.
April ..	Mills, 13, West Street, Wal- thamstow	Execution of repairs at 63, Summerhill Road	Order made for payment of expenses of repairs.
July ..	E. Moss 30, Hartington Road	Serving in Shop after closing hour	Fined 5s.
„ ..	S. Cohen, 669, Green Lanes	„	„ 10s.
„ ..	L. Levy, 513, Green Lanes	„	„ 10s.
„ ..	P. F. Teasdale, 383, Green Lanes	„	„ 5s.
„ ..	R. Raphael, 1, Grand Parade	„	„ 5s.
„ ..	W. H. Speller, 527, Seven Sisters Road	„	„ 20s.
„ ..	P. Laccarini 728, High Road	„	„ 20s.
„ ..	N. Berg, 514, High Road ..	Not giving Assistant half-holiday and keeping shop open	„ 40s.
„ ..	Mayhew, Bradfield, Reading	Execution of repairs at 2, Sidlaw Terrace Jansons Road	Council's ac- count and cost of sum- mons paid prior to hear- ing of case.
October ..	Martin, 10, Moreton Road	Serving in Shop after closing hour	Fined 20s. and costs.
„ ..	P. Laccarini, 728, High Road	„	„
„ ..	Straker, 43, West Green Road	„	„
„ ..	Colman, 149, Welbourne Road	„	„
„ ..	G. Colletta, 14, Park Road	„	„
„ ..	W. H. Goodwin, 271, Park Lane	„	„

SANITARY CIRCUMSTANCES OF THE AREA. WATER.

The District is supplied with water by the Metropolitan Water Board, the sources being the River Lee and the New River. The Central Public Baths' supply is derived from an artesian well—at a depth of 453 feet—at the rear of the Town Hall; the amount of water pumped and used for the Public Swimming and Slipper Baths at The Green, Tottenham, and for the supply of hot and cold water for the Town Hall and School Clinic amounting, approximately, to 30,300,000 gallons per annum. The water from these sources is of great purity.

The Metropolis Water Act requires that in all premises in which water is used there shall be supplied a cistern for the storage of water, and the Council have made Bye-Laws imposing upon occupiers of premises the obligation of cleansing these cisterns half-yearly. Complaints are received from time to time respecting the purity of the water. Invariably, it has been found that the cause of the complaint has arisen from these Bye-Laws being honoured in the breach rather than the observance.

RIVERS AND STREAMS.

The streams in the District are all tributaries of the River Lee. The Metropolitan Water Board are responsible for the condition of the portion of the Pymmes Brook in this District, and the County Council for the remainder of the streams. As has been pointed out in the foreword to this Report, complaint has been made respecting the pollution of the River Lee below Tottenham Lock. The condition of the water above the Lock is entirely satisfactory; but for a period of years, the water below the Lock has been grossly polluted. This pollution—so far as Tottenham's contribution to it is concerned—has arisen mainly from the Pymmes Brook, which enters the River Lee about 50 yards below Tottenham Lock. It is the opinion of your Medical Officer that if Pymmes Brook were purified and the bed of the river below the Tottenham Lock dredged and cleansed, the water below the Lock would be almost as good as that above it, except perhaps after storm, when there is some slight pollution from the Stonebridge Brook, arising from overflow at the Pumping Station. This qualification is deliberate, for this portion of the river receives the surface-water drainage from Tottenham and neighbouring districts, and the pollution from the road surfaces finds its way into this part.

DRAINAGE AND SEWERAGE.

The drainage of Tottenham is, for the most part, upon the dual system. The surface-water drainage is, as has been stated above, received into the various streams and finds its way ultimately into the River Lee below Tottenham Lock. The soil sewage is received at the Pumping Station, situated in the neighbourhood of the junction of the Stonebridge Brook with the River Lee, and is conveyed into the sewerage system of the London County Council.

The dual system has not been introduced into all parts of the District. There still remain certain areas where the single sewer receives both surface water and soil discharges. It thus happens that in times of heavy rainfall the amount of sewage that is delivered at the Pumping Station is greater than the L.C.C. will allow to pass into their sewerage system, except at very heavy charges, and the surplus is received into a storm-water tank, to be disposed of when the pressure upon the sewerage system is relieved.

CLOSET ACCOMMODATION.

The closets in Tottenham are entirely upon the water carriage system. 4 only drain into cesspools, and these latter are cleansed at frequent intervals by the owners.

PUBLIC CONVENIENCES.

There are 4 Public Conveniences in the District, situated as follows. The hours of opening and closing are stated:—

Bruce Grove	..	..	..	..	}	Open 8 a.m. to 11 p.m.
Seven Sisters Corner	..	..	..	..
Green Lanes (opposite “Queen’s Head”)	..	..	..	..
Tottenham Hale	..	..	..	..	..	8 a.m. to 10 p.m.

The receipts from these conveniences for the year amounted to £975 6s.

SCAVENGING.

Scavenging is undertaken by the staff of the Engineer’s Department of the Council, and the material is disposed of by the burning of house refuse at the Refuse Destructor Works, near the Tottenham Marshes, and by a deposit of slop and street refuse at the Council’s tip, White Hart Lane. The Engineer has reported to the Council the inadequacy of the plant at the Destructor Works in times of pressure, and suggested certain alterations and extensions. These are now under the consideration of the Council.

Portable dustbins are the chief means employed for the storage of house refuse, pending removal once weekly.

GENERAL SANITARY WORK.

Hereunder is specified in tabular form the inspections by the Sanitary Officers during 1925, and the nature of the defects discovered:—

	Harringay. Ward (Mr. Redston).	West Green Ward (Mr. West).	St. Ann's Ward (Mr. Smith).	High Cross Ward (Mr. Portman).	Middle Ward (Mr. Miller).	Lower Ward (Mr. Shillito).
House-to-house inspections	110	187	108	70	110	209
Re-inspections	1473	1066	1402	914	1549	1245
Drains examined, tested, etc. ..	72	46	189	71	98	106
Drains unstopped	11	39	35	7	23	69
Drains reconstructed and repaired ..	46	12	36	20	43	35
Disconnecting traps inserted ..	2	3	1	1	1	8
Soil pipes and drains ventilated ..	20	6	23	4	37	14
R.W. pipes, wastes, etc. disconnected	6	9	49	5	26	14
Dustbins provided	51	41	185	32	42	53
Roofs repaired	107	79	92	49	43	62
Gutters repaired and renewed ..	102	68	58	23	21	32
Cisterns cleaned, repaired, etc. ..	21	12	25	16	14	26
W.C. new apparatus provided ..	12	4	19	13	15	96
W.C. repaired, cleaned, etc. ..	41	28	41	—	17	
W.C. Water Fittings repaired ..	49	43	38	23	22	50
Yards paved and drained	34	33	26	31	45	17
Premises cleaned, etc.	157	175	177	59	176	163
Ventilation below floor provided ..	14	15	39	5	5	4
Defective window frames and sashes ..	24	46	60	13	9	195
Other defects	42	108	216	30	54	—
Smoke observations	35	26	39	16	12	8
Accumulations of refuse	22	12	10	9	6	17
Visits in connection with cases of infectious disease (including Tuberculosis)	129	119	142	122	108	227
Rooms inspected after disinfection ..	19	46	89	112	90	59
Other inspections, etc.	38	104	210	53	94	—
Factories—No. of inspections ..	45	50	43	3	16	41
Workshops & workplaces „ ..	60	63	42	6	24	75
Laundries „ ..	4	10	4	—	4	—
Dairies, etc. „ ..	68	51	44	20	40	39
Cowsheds „ ..	—	—	—	—	—	6
Bakehouses „ ..	32	27	44	7	58	48
P.H. urinals „ ..	121	52	54	45	75	59
Stables and Mews „ ..	63	73	66	3	58	42
Complaints investigated	111	153	382	233	111	189
Appointments	121	112	85	21	96	300
School inspections	2	3	6	4	4	10
Pawnbrokers	3	—	—	—	—	2
Common Lodging Houses	—	—	—	27	—	28
Slaughter-houses	—	81	28	30	—	80
Knackers' Yards	—	—	—	48	—	—
Brooks and Watercourses	6	—	—	1	20	6
Butchers' shops	98	77	32	106	97	107
Fishmongers' shops	95	29	30	34	79	61
Fruiterers' shops	83	28	35	16	54	47
Ice Cream premises	6	18	13	1	6	9

SANITARY WORK CARRIED OUT BY FEMALE
SANITARY INSPECTOR.

Visits to Outworkers' Premises	..	..	..	..	864
,, Workshops	..	..	..	..	140
,, Laundries	..	..	..	..	3
,, Factories	..	..	..	..	8
Complaints Investigated	..	..	..	..	119
Visits <i>re</i> Infectious Diseases	..	..	..	..	2
Miscellaneous Visits	..	..	..	..	21
Re-inspections	..	..	..	..	552
Swabs Taken	..	..	..	..	923
S. F. Contacts Examined	..	..	..	..	320

FACTORY AND WORKSHOP ACT, 1901.

In compliance with Section 132, I have to submit a *resume* of the work effected during the year—under the provisions of the above Act—in the form prescribed by the Home Office:—

1.—*Inspection of Factories, Workshops and Workplaces.*

INSPECTIONS MADE BY SANITARY INSPECTORS.

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions.
Factories (including Factory Laundries)	228	74	—
Workshops (including Workshop Laundries) }	424		
Workplaces (other than outworkers' premises included in Part 3 of this Report) }			
Total	652	74	—

2.—*Defects Found.*

Particulars.	Number of Defects.			Number of Prosecutions.
	Found.	Remedied.	Referred to H.M. Inspector.	
<i>Nuisances under the Public Health Acts*—</i>				
Want of Cleanliness	58	58	—	—
Want of ventilation	1	1	—	—
Overcrowding	—	—	—	—
Want of drainage of floors	—	—	—	—
Other nuisances	5	5	—	—
Sanitary accommodation {	insufficient	—	—	—
	unsuitable or defective	8	7	—
	not separate for sexes ..	3	3	—
<i>Offences under the Factory & Workshop Act</i>				
Illegal occupation of underground bake-houses (s. 101)	—	—	—	—
Other offences (excluding offences relating to outwork which are included in Part 3 of this Report)	—	—	—	—
Total	75	74	—	—

* Including those specified in sections 2, 3, 7 and 8, of the Factory and Workshop Act as remediable under the Public Health Acts.

3.—Home Work.

OUTWORKERS' LISTS, SECTION 107.															
Nature of Work.	Lists received from Employers.				Number of Addresses of Outworkers received from other Councils.	Number of Addresses of Outworkers forwarded to other Councils.	Prosecutions		Number of Inspections of Outworkers' Premises.	Outwork in Unwholesome Premises, Section 108.			Outwork in Infected Premises, Sections 109, 110.		
	Twice in the year.		Once in the year.				Failing to keep or permit inspection of Lists.	Failing to send Lists		Instances.	Notices served.	Prosecutions.	Instances.	Orders made (Sec. 109).	Prosecutions (Secs. 109, 110).
	Total Lists.	Outworkers.	Total Lists.	Outworkers.											
Wearing Apparel ..	16	160	8	43	518	103	—	—	671	—	—	—	—	—	—
Boots and Shoes ..	8	77	—	—	30	51	—	—	56	—	—	—	—	—	—
Stationery ..	4	10	—	—	1	—	—	—	11	—	—	—	—	—	—
Cardboard, etc.. Boxes	4	28	—	—	10	10	—	—	28	—	—	—	—	—	—
Brushes ..	2	4	—	—	8	3	—	—	9	—	—	—	—	—	—
Smallware ..	—	—	1	1	—	1	—	—	2	—	—	—	—	—	—
Upholstery ..	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—
Furs ..	—	—	—	—	16	—	—	—	16	—	—	—	—	—	—
Umbrellas ..	—	—	—	—	8	—	—	—	8	—	—	—	—	—	—
Fancy Goods ..	2	3	—	—	8	—	—	—	11	—	—	—	—	—	—
Artificial Flowers ..	—	—	—	—	5	—	—	—	5	—	—	—	—	—	—
Christmas Crackers	2	49	—	—	8	32	—	—	25	—	—	—	—	—	—
Leather Goods ..	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—
Tennis Balls ..	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—
Toys ..	2	3	—	—	—	—	—	—	3	—	—	—	—	—	—
Lace Goods ..	—	—	—	—	12	—	—	—	12	—	—	—	—	—	—
Lamp Shades ..	—	—	—	—	4	—	—	—	4	—	—	—	—	—	—
Totals ..	40	334	9	44	631	200	—	—	864	—	—	—	—	—	—

4.—Registered Workshops.

Workshops on the Register (s. 131) at the end of the Year.										Number.
Workshops	..	..	..	..	..	..	..	..	..	235
Laundries	..	..	..	..	..	..	..	..	..	28
Bakehouses	..	..	..	..	..	..	..	..	..	64
Total Number of Workshops on Register										327

5.—Other Matters.

Class.	Number.
Matters notified to H.M. Inspector of Factories:—	
Failure to affix Abstract of the Factory and Workshop Act (Sec. 133)	3
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act (s. 5)	Notified by H.M. Inspector .. 12
Reports (of action taken) sent to H.M. Inspector .. ..		12
Other	—
Underground Bakehouses (s. 101):—	
Certificates granted during the year	—
In use at the end of the year	4

NOTE.—The Factory and Workshop Act, 1901 (s. 132) requires the Medical Officer of Health, in his Annual Report to the District Council, to report specifically on the administration of that Act in workshops and workplaces, and to send a copy of his Annual Report, or so much of it as deals with this subject, to the Secretary of State (Home Office).

UNSOUND FOOD.

The Sanitary Inspectors have seized, or had brought to them for condemnation, the following articles:—

Meat:—

2 Pigs.
1 Sheep
12 Ox Livers
19 Pigs' Heads.
2 forequarters Veal.
18½ stone Beef.

Fruit and Vegetables:—

5 barrels Grapes.
131 boxes Tomatoes.
50 baskets Greengages.
2 sacks Chestnuts.
5 lb. Raspberries.

Fish:—

18 stone and 3 boxes Haddocks.
16 stone and 1 box Skate.
6 stone Plaice.
1 box Dabs.
1 box Roe.
1 box Cat Fish.
2 boxes Herrings.
5 boxes Fillets.
1 box Kippers.
1½ bushels Whelks.
1 cwt. and 2 bushels
Winkles.

FOOD AND DRUGS.

I am obliged to the County Council (who are the Authority for administering the provisions of the Sale of Food and Drugs

Act, 1875), for the following information respecting samples taken in Tottenham:—

Name of Article.	Samples.	
	Taken.	Found Adulterated.
Milk	564	24
Milk, condensed	1	—
Butter	24	—
Cream	5	3
Coffee	7	—
Fish Paste	1	—
Sausage	2	—
Spice, mixed	1	—
Arrowroot	7	3
Cinnamon	8	3
Cornflour	3	—
Ham	7	—
Margarine	1	—
Meat Paste	1	—
Mustard	6	—
Pepper	4	—
Prescription	4	3
Whisky	12	4
	<hr/>	<hr/>
	658	40
	<hr/>	<hr/>

Number of Prosecutions	10
Number of Convictions	5
Fines and Costs imposed	£16

The figures given for adulterated samples include some adulterated informal samples, in respect of which no proceedings could be taken.

DISINFECTION AND DISINFESTATION.

Infected rooms are sprayed with Formalin when the infected patient is removed to hospital. The clothing is, at the same time, disinfected in a Washington Lyons Disinfector.

With regard to disinfestation, Slipper Baths are provided at the Disinfecting Station, and persons in a verminous condition are bathed there, while their clothing and bedding are disinfested by steam.

1,700 rooms were disinfected.
 8,931 articles were disinfected or destroyed.
 361 library books were disinfected.
 26 persons were bathed.

EXHUMATIONS.

Three exhumations took place at the Tottenham Cemetery, under the supervision of the Sanitary Inspector. The Home Office requirements were complied with.

SMOKE ABATEMENT.

Observations have been kept upon the factory chimneys, and communications have been sent to proprietors to abate nuisances arising from smoke on 8 occasions. No legal procedure was required.

PREMISES AND OCCUPATIONS WHICH CAN BE CONTROLLED BY BYE-LAWS OR REGULATIONS.

SLAUGHTER HOUSES.—There are 12 private Slaughter-Houses in the District, 5 being registered and 7 licenced. They are periodically visited, and it has not been found that any offence has been created.

DAIRIES, COWSHEDS AND MILKSHOPS.

13 applications from retail purveyors were received during the year for registration under the Dairies, Cowsheds and Milkshops Order, 1885, and Milk and Dairies (Amendment) Act, 1922. These were acceded to.

There are at present upon the register, 183 retail purveyors of milk.

2 purveyors were licenced for the sale of "Grade A (Tuberculin Tested)" Milk, 1 for the sale of "Certified" Milk, 1 for the sale of "Pasteurised" Milk (supplementary licence), and 1 for the sale of "Certified" Milk (supplementary licence).

Periodical inspection is made of the premises where the Graded Milk is bottled, and samples are taken in accordance with the Ministry of Health's scheme.

COMMON LODGING HOUSES.

There are 5 Common Lodging Houses in the District. All have been kept under observation, and appropriate action was taken to remedy any defects found.

OFFENSIVE TRADES.

Although no Offensive Trades have been established in the District, notice was taken of bone-boiling and fat-melting in connection with a knacker's yard. The attention of the proprietors was directed to this fact, and an undertaking was given that these irregularities would be terminated forthwith.

UNDERGROUND SLEEPING ROOMS.

The number of Underground Sleeping Rooms in the District is so small that regulations in respect of them under the Housing Act, 1925, Sec. 18 (1) are uncalled for. In only one instance has any difficulty arisen with reference to the habitation of an underground dwelling during the past 12 months.

SCHOOLS.

The sanitary condition of the Schools is reported upon in a separate section.

HOUSING.

I. General Housing Conditions in the Area.

1. *General Housing Conditions.*—The great majority of the houses in Tottenham are of the artisan type. The method of building was generally long terraces of uniform pattern until the operation of the housing schemes. On the new estates, a more ornate type of building is erected, and the general effect is one of improvement. On the London County Council's White Hart Lane Estate, tenement buildings have been erected (Topham Square), and although for the area occupied by the houses greater accommodation is afforded, it is hoped that further building of tenement houses will not be proceeded with.

2.—(a) *Extent of shortage or excess of houses.*—The extent of the shortage of houses may be gauged by the statement in the foreword that approximately 3,000 families are entered upon the Treasurer's waiting list.

(b) *Measures taken or contemplated to meet any shortage.*—The Council have at present under consideration a scheme for the erection of 300 houses. The extent to which private enterprise has contributed to a solution of the difficulty will be appreciated by the fact that during 1925, 324 houses were erected by this means.

II. Overcrowding.

The exact extent to which overcrowding prevails in the District cannot definitely be stated. That it does exist to some considerable

degree is a matter of common knowledge. The employment of statutory measures to enforce the abatement of it is a course that your Council has very reluctantly considered, having regard to the hopelessness of providing adequate alternative accommodation. The cause of the overcrowding is mainly due to the overflow from the London area. All that it has been possible to do to relieve congestion in houses has been for the Sanitary Inspectors to advise re-distribution of families in their dwellings so as to make the best use of the available accommodation.

III. Fitness of Houses.

1. The general standard of housing in the area is tolerably good, and particulars of the defects found are referred to in the Table on page 59. These defects are due, in many instances, to lack of supervision and proper care by the owners, and damage and neglect by the tenants.

2. The Table on page 69 indicates the general action that has been taken under the Housing and Public Health Acts with regard to unfit houses. No insuperable difficulties have been found in having the remedies effected. It will be observed, however, by reference to the Table on page 56, that in two instances it was necessary to appeal to the Court to recover monies expended in carrying out the work under Section 3 of the Housing Act, 1925.

IV. Unhealthy Areas.

No complaints have been received, and no representations have been made or action taken, with regard to Unhealthy Areas in the District during the year.

V. Bye-Laws relating to Houses let in Lodgings, and to Tents, Vans, Sheds, etc.

The Bye-Laws relating to Houses let in Lodgings are now obsolete, and to be effective require to be revised, for, amongst other reasons, the rentals specified under the existing Bye-Laws are much too low for present purposes.

No action has been called for under the Tents, Vans and Sheds Bye-Laws during the year under review.

VI. General and Miscellaneous.

Any other matters relating to Housing engaging the attention of the Department during the year have been set out in tabular form, and are to be found on page 69 of this Report.

New Houses erected during the Year.

By private builders (no State assistance)	..	..	..	324
By the London County Council	..	..	..	8
By the Tottenham Council	..	..	..	42
				<hr/>
				374
				<hr/>

Unfit Dwelling-Houses.

Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	..	..	2,820
Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidated Regulations, 1925	..	794	
Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	..	17	
Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	..	..	1,724

Remedy of Defects without service of Formal Notices.

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	1,444
---	----	----	----	----	----	----	----	-------

Action under Statutory Powers.

(a) Proceedings under Section 28 of the Housing, Town Planning, &c., Act, 1919, and Sec. 3 of the Housing Act, 1925

(1) Number of dwelling-houses in respect of which notices were served requiring repairs	..	..	228
(2) Number of dwelling-houses which were rendered fit—			
By owners	..	..	197
By Local Authority in default of Owners	..	8	
(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close	..	—	

(b) Proceedings under Public Health Acts.

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	50
(2) Number of dwelling-houses in which defects were remedied—	
By owners	42
By Local Authority in default of owners ..	—

(c) Proceedings under Tottenham Local Board Act.

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	2
(2) Number of dwelling-houses in which defects were remedied—	
By owners	2
By Local Authority in default of owners ..	—

(d) Proceedings under Sections 17 and 18 of the Housing, Town Planning, &c., Act, 1909, and Sec. 11 of the Housing Act, 1925.

(1) Number of representations made with a view to the making of Closing Orders	17
(2) Number of dwelling-houses in respect of which Closing Orders were made	17
(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit	—
(4) Number of dwelling-houses in respect of which Demolition Orders were made	—
(5) Number of dwelling-houses demolished in pursuance of Demolition Orders	—